

# INTERVIEW SCRIPT FOR TRAVELERS FROM EBOLA-AFFECTED COUNTRIES (Updated 11.15.22)

## For Traveler Monitoring

Below is an outline of the steps and information to cover while interviewing a traveler. To ensure you have the best call response, please use the following suggestions to provide you and the traveler a comfortable phone environment:

- Always use a **warm, welcoming, confident tone of voice** and speak at a measured pace.
- Be sure to **personalize the call** so that you sound approachable and friendly and to help build a personal connection with the traveler. In addition, you may add "Good Morning," "Hi," or another welcome phrase to start the call.
- It is important to remember that **each traveler is different**. Some will be nervous or scared and others may be frustrated and confused.
- Someone may be responding on behalf of a spouse, child, or loved one, so remember to **be clear and to repeat and emphasize essential information**.
- Help **ensure the traveler is comfortable, informed**, and can access the resources or support they may need. We want to ensure travelers do not feel as if they did something wrong. Travelers should know that we are here to make sure they are informed and receive the support, resources, and information they need.
- **Acknowledge verification**. Use the traveler's name, or if they are responding on behalf of someone else, acknowledge that and approach the conversation through that lens by repeating information and providing time for them to verify information.
- **Share the benefit of this call**. It is important to emphasize that the information travelers provide or receive will help protect their family, loved ones and friends/co-workers (if applicable). Be clear about the purpose of the call and what the traveler will gain from being on the call. This may help them understand the purpose of the call, its importance, and the benefits for themselves and/or loved ones.
- **Build trust**. We are requesting and sharing a lot of information related to the traveler. That may feel uncomfortable and puts your traveler in a vulnerable position. Some travelers may be hesitant to answer certain questions or need a moment to process the information you are providing. It is important that you clearly explain how you are involved with the public health system, what your role is, and how you will help ensure the traveler and their loved ones receive the resources and support they need. The traveler may have questions or concerns about why you are calling or how you received their contact information. Be clear about your role and your purpose for the call.
- **Be patient**. Some travelers may be working from home or caring for loved ones. Others may be at work. Travelers may have children in the background or be multi-tasking while on the call. Be sure to repeat vital information, check for understanding, and define unfamiliar medical terms (ex. symptomatic) to ensure the purpose is understood. Take the time needed to ensure your traveler feels heard and has the understanding they need to protect themselves and their families.

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### Section 1: Preparing for the Interview

#### Review the traveler information

- Name and date of birth or reported age
- Residential address

Have a calendar assessable to be prepared to calculate the length of monitoring needed (and quarantine if necessary) based on the traveler’s last date in Uganda.

Bring up the map of the outbreak area to be ready to reference during the call.

This procedure is done prior to calling the traveler.

*\*If traveler is a minor – Speak first with legal guardian or parent. See script sections below for “Minors Under 13” and “Minors Above 13, but Under 18.”*

Maps of Outbreak:  
<https://www.cdc.gov/vhf/ebola/outbreaks/uganda/2022-sep.html>

<https://wwwnc.cdc.gov/travel/images/ebola-uganda.png>

### Section 2: Introducing Yourself and Purpose for the Call

#### IF THERE IS A RESPONSE:

“Hello, my name is [insert your name] and I am calling on behalf of the NC Division of Public Health regarding a time-sensitive public health matter related to people who have recently traveled to Uganda. May I speak with [insert traveler’s first name]?”

#### IF THERE IS NO RESPONSE (VOICEMAIL SCRIPT):

“Hello, this is [insert your name] calling for [insert traveler’s first name] on behalf of the NC Division of Public Health. We are reaching out about a time-sensitive public health matter related to your recent travel to Uganda and would like to speak with you to provide some further information.

“At your earliest convenience, please give us a call back through the statewide call

If the person is not the individual you were trying to reach, ask to speak with the correct person. If the number is wrong, apologize for the inconvenience and end the call.

Note: If Local Health Departments are making the outreach, all instances of NC Division of Public Health should be replaced with the name of the Local health Department and the state call center number should be

<p>center at (844) 628-7223 between 8am to 6pm. When the message comes on, please immediately select extension 8 and ask for me, [insert your name]. Again, the number for the call center is (844) 628-7223 ext 8, and I am [insert your name] calling on behalf of the NC Division of Public Health regarding a time-sensitive public health matter related to your travel to Uganda. Thank you.”</p>	<p>replaced with the LHD phone number.</p>
<p>“Could I please confirm, is English your preferred language?”</p> <p><b>IF ENGLISH IS TRAVELER’S PREFERRED LANGUAGE:</b></p> <p>“Thank you. And is this the best phone number if I need to reach you again?”*</p> <p><b>IF ENGLISH IS NOT THE TRAVELER’S PREFERRED LANGUAGE:</b></p> <p>“I’d like for you to be able to speak to someone who can allow you to communicate how you’re most comfortable. May I call you back in just a few minutes with someone that can help us with that?”**</p>	<p>*If the traveler indicates another preferred phone number, update their REDCap event appropriately.</p> <p>**If the traveler confirms that English is not their preferred language, continue according to regional or NCDPH direction.</p>
<p><b>IF THE TRAVELER IS NOT AVAILABLE TO TALK:</b></p> <p>“Is there a better time for me to call back?”</p>	<p>The traveler might be sleeping, resting, or at work. Wait for a response; thank the person, document, and schedule an outreach for the designated time.</p>
<p><b>IF THE TRAVELER IS AVAILABLE:</b></p> <p>“I have some questions to ask you related to your recent travel to Uganda, but first would you mind verifying your address, county and date of birth, so I can ensure that I have the right person on the phone, and that the information in my system is correct?”</p>	<p>*Confirm at least one additional piece of identifying information.</p> <p>If the traveler is reluctant to confirm identity, ask them to call the LHD to confirm the call is legitimate. If the traveler is ultimately unwilling or unable to confirm their identity, the call cannot continue.</p> <p>Note: The traveler information provided by CDC is often incorrect. You may proceed with the call the person verifies their name and travel even if the address and DOB don’t exactly match the information we were provided.</p>
<p><b>MINORS - UNDER AGE 13:</b></p> <p>“Hello, my name is [insert your name] and I am calling on behalf of the NC Division of Public Health regarding an urgent public health matter. May I speak with your legal guardian or parent?”</p>	<p><b>Must speak first to parent or guardian.</b></p> <p>Wait for guardian or parent before continuing with call.</p>
<p><b>MINORS - ABOVE AGE 13, BUT UNDER AGE 18:</b></p> <p><b>IF traveler answers:</b> “Since you are under age 18, I will need to speak to your legal guardian or parent first. Would you please put them on the phone?”</p> <p><b>IF legal guardian answers:</b> “Hello, my name is [insert your name]. May I speak with</p>	<p><b>Must speak first to guardian or parent. Ask permission to speak with minor.</b></p> <p>Wait for a response. If no guardian or parent is available,</p>

<p>[name of traveler]’s legal guardian or parent?</p> <p>“I have a few questions for your child to help understand their risk of becoming ill and to provide you some information and resources if needed. Would it be okay with you if I spoke with them directly or would you prefer to stay on the line?”</p>	<p>ask if there is a better time to call back or a better number.</p> <p>If the guardian or parent answers the phone, continue with the call.</p>
<p><b>ONCE IDENTITY HAS BEEN VERIFIED AND SPEAKING TO APPROPRIATE PERSON:</b></p> <p>“Thank you for verifying your information. I am calling today because there is an active Ebola outbreak in Uganda and we understand you recently traveled there. We are checking in with people who were in Uganda in the 21 days prior to their entry into the USA to assess their risk of exposure to Ebola and offer information and support to protect your health. I have a few questions to ask to better understand your risk and provide details on next steps you may need to take. Please know that any information you give me during our conversation is confidential.”</p>	<p>Listen, reflect as appropriate.</p>

### Section 3: Symptoms

<p>“How are you feeling today?”</p> <p>“The following are symptoms that might be caused by Ebola. Do you currently have any of the following symptoms?”</p> <ul style="list-style-type: none"> <li>• Fever - <b>If yes</b> “What has been your highest measured temperature in the past 24 hours?”</li> <li>• Headache</li> <li>• Muscle aches or joint pains</li> <li>• Weakness or fatigue</li> <li>• Sore Throat</li> <li>• Loss of appetite</li> <li>• Abdominal pain or cramps</li> <li>• Vomiting</li> <li>• Diarrhea</li> <li>• Unexplained bleeding or bruising</li> </ul> <p><b>If no symptoms are reported, proceed to Section 4.</b></p> <p><b>If symptoms are reported:</b></p> <p>“When did your symptoms start?”</p> <p>Because you have shared that you are experiencing symptoms that might be caused by Ebola, you need to isolate immediately. Isolation means avoiding contact with or sharing common spaces with other people. This includes you having a private bedroom and bathroom that are not shared with others.</p> <p>After we get off this call, your local health department or someone else from the NC Division of Public Health will be following up for an additional assessment to determine next steps. Many of the Ebola symptoms can also be symptoms of other diseases, and this does not mean you have Ebola, but we want to take the utmost</p>	<p>More information on Ebola symptoms can be found here: <a href="https://www.cdc.gov/vhf/ebola/symptoms/index.html">https://www.cdc.gov/vhf/ebola/symptoms/index.html</a></p> <p>If you speak to someone who has symptoms, you need to call the NC Public Health Epidemiologist On-Call at 919-733-3419 immediately after ending the phone call.</p>
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precautions to protect your loved ones and your community. Do you have what you need to isolate right now? “

“Do you feel well enough to continue to answer a few questions for me? “

**If yes, proceed to Section 4.**

**If no** “Ok, I understand. As I noted before, someone else will be following up with you shortly. Please try to make sure you are able to be by the phone for the follow up call. It may come from a different number than I have just called you on.”

## Section 4: Exposure Risk Assessment

“Thank you so much for telling me about your symptoms. Would it be all right if I ask you a few more questions about your time in Uganda?”

“When was the last day you were in Uganda?”

“Going back 21 days from today while traveling in Uganda,

- What districts did you visit and on what dates? If you do not know the district names, would you be able to find them on a map or provide me the names of the cities or towns you visited?
  - Have you been to an area with a known active Ebola virus outbreak?
- “Did you have any contact with or were you around a person sick with Ebola, or a person who was sick with or died of an unknown sickness?” **If yes, ask:**
  - “On what date(s) did you have contact?”
  - “How long did you have contact with the person?”
  - “Was this:
    - A person with confirmed Ebola,
    - A person with suspected Ebola, or
    - A person sick with an unknown illness?”
  - “What district of Uganda were you in when you had contact with this person”
  - “What type of contact did you have?
    - “Did you stay in the same residence as the person while the person was sick?”
    - “Did you provide direct care to the person?” **If yes, ask:**
      - “Was this in a healthcare setting/facility? Please note this applies to care provided by healthcare workers as well as non-healthcare workers who provided care in a healthcare setting.” **If yes, complete healthcare setting specific questions at the end of this section**
    - “Was this in a home (or another non-healthcare setting)?”
    - “Did you have other physical contact with the person?”
    - “Were you near (within 3 feet/1 meter) the person but had no physical contact?” **If yes, ask:**
      - “How long were you near the person?”

Document all exposure responses within their REDCap form.

Each question refers to the last 21 days while the traveler was in Uganda.

*Use the CDC map to determine if they were in an outbreak location:*

<https://www.cdc.gov/vhf/ebola/outbreaks/uganda/2022-sep.html>

If the traveler does not know the exact name of the district, try to help them by asking what part of the country they were in (North, South, East, West or Central) or what cities they traveled to. Feel free to name some of the nearby districts to areas they mention, in case they recognize the district name when you say it. If the traveler is still struggling to remember, and they are able to look on a computer or smart phone, you could ask if they could google “districts in Uganda” and perhaps seeing the map would help.

*Map of districts in Uganda*

[https://en.wikipedia.org/wiki/Districts\\_of\\_Uganda](https://en.wikipedia.org/wiki/Districts_of_Uganda)

*Information on Ebola*

*Assessment can be found here:*

<https://www.cdc.gov/quarantine/pdf/sample-Ebola-Exposure-Screening-Assessment-Tool-p.pdf>

- “Did you have any exposure to blood or other body fluids? Bodily fluids include urine, saliva, sweat, feces, vomit, breast milk, amniotic fluid, and semen.” **If yes, ask**
  - “On what date(s) were you exposed?”
  - “Was fluid from:
    - A person with confirmed Ebola,
    - A person with suspected Ebola, or
    - A person sick with or having died from an unknown illness?”
  - “Did the exposure include
    - Getting stuck with a needle or other sharp object?
    - Splashing blood or body fluids in the eye, nose, or mouth?
    - Direct skin contact with the ill person’s blood or body fluids?”
  - “Please describe any additional details about the exposure. ”
  - “What district of Uganda were you in when you had this exposure?”
- “Did you visit a health clinic or hospital for any reason?”
- “Did you touch or have any exposure to a dead body, or attend a funeral?” **If yes, ask**
  - “On what date(s) were you exposed?”
  - “For how long were you exposed?”
  - “Was the person known or suspected to have Ebola?”
  - “Did you touch the dead body?”
  - “Did you prepare the body for burial?”
  - “Did you touch any items that had been in contact with the dead body?”
  - “Did you work as a burial worker?”
  - “Did you wear personal protective equipment (including gloves, gowns, masks, and eye protection) at ALL times?”

### Healthcare Setting Specific Questions\*:

- “During all encounters with a patient with Ebola, did you wear the recommended personal protective equipment (gloves, gown, mask, and eye protections)?” **If no, ask**
  - “On what date(s) did you not wear the personal protective equipment around the patient with Ebola?”
- “Did you have any physical contact with the person with Ebola?” **If no, ask**
  - “Were you within 3 feet (1 meter) of the person with Ebola?” **If yes, ask**
    - “For how long?”
- “Did you have **unprotected exposure** to any of the following?” [“As a reminder, **unprotected exposure** means without the use of the recommended personal protective equipment [gloves, gown, mask, and eye protection] or experiencing a breach in infection control precautions.”]
  - “Blood or other body fluids (including feces, saliva, sweat, urine

And here:

[https://www.cdc.gov/vhf/ebola/clinicians/evaluating-patients/index.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvvhf%2Febola%2Fclinicians%2Fevaluating-patients%2Fcase-definition.html](https://www.cdc.gov/vhf/ebola/clinicians/evaluating-patients/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvvhf%2Febola%2Fclinicians%2Fevaluating-patients%2Fcase-definition.html)

*Healthcare workers include physicians, nurses, emergency medical personnel, dental professionals and students, medical and nursing students, laboratory technicians, pharmacists, hospital volunteers, and administrative staff.*

\*Ask Healthcare Provider Specific questions only to people who said they provided direct care to someone in a healthcare setting to someone with Ebola or an unknown illness

All questions refer to experiences in Uganda over the last 21 days

- vomit, sputum, breast milk, tears, or semen) of a person with Ebola or an unknown illness” **If yes, ask**
- “On what date(s) were you exposed?”
  - “For how long were you exposed?”
  - “Please describe the exposure.”
- “A person who died of suspected or known Ebola?” **If yes, ask**
- “On what date(s) were you exposed?”
  - “For how long were you exposed?”
  - “Please describe the exposure.”

## Section 5: Monitoring and Next Steps for Non-Symptomatic Travelers

“Given the active outbreak in Uganda, there is a chance you could have been exposed to Ebola during your travels and we want to take the utmost precautions to protect your loved ones and your community. Based on the information you shared today, we have some follow up steps you will need to take. Do you have something to write with to take down the information?”

### **If high risk exposure identified:**

“Starting immediately, you will need to quarantine. Quarantine means avoiding contact with or sharing common spaces with other people. This includes you having a private bedroom and bathroom that are not shared with others. Additionally, you are restricted from traveling by any commercial transportation methods. You will need to do this for 21 days from the day you had a known exposure, which based on the information you provided earlier would be until [DATE of exposure + 21 days]. Do you have what you need to quarantine?”

“You will also need to monitor your health closely for that same time period. This means evaluating whether you have symptoms that could be caused by Ebola. Do you need me to refresh you on what those symptoms might be?”

“Lastly, a member of my team or I will need to speak to you by a phone call daily to check on you. What would be the best time and phone number to call you on?”

### **If risk due to having traveled to an outbreak district without known high risk exposure:**

“You will need to monitor your health closely for 21 days since you were last in Uganda, which based on the information you provided earlier would be until [DATE of last day in Uganda + 21 days]. This means evaluating whether you have symptoms that could be caused by Ebola. Do you need me to refresh you on what those symptoms might be?”

“Please note that if you are planning to travel outside of [insert traveler’s county] for more than 24 hours you need to let your local health department know ahead of time so they can coordinate with the county you will be traveling to.”

If you have questions, call the NC Public Health Epidemiologist On-Call at 919-733-3419; they are available 24/7

More information on the various levels of risk and action items can be found here: <https://www.cdc.gov/quarantine/interim-guidance-risk-assessment-ebola.html>

Ebola symptoms can be found here: <https://www.cdc.gov/vhf/ebola/symptoms/index.html>

Have the traveler repeat the symptoms you have previously listed and need to monitor.

“Lastly, a member of my team or I will need to speak to you by a phone call twice a week to check on you. What would be the best time and phone number to call you on?”

**If risk due to having traveled to Uganda (not in an outbreak zone) without known high risk exposure:**

“You will need to monitor your health closely for 21 days since you were last in Uganda which based on the information you provided earlier would be until [DATE of last day in Uganda + 21 days]. This means evaluating whether you have symptoms that could be caused by Ebola. Do you need me to refresh you on what those symptoms might be?”

“Please note that if you are planning to travel outside of [insert traveler’s county] for more than 24 hours you need to let your local health department know ahead of time so they can coordinate with the county you will be traveling to.”

“Lastly, a member of my team or I will need to speak to you by a phone call once a week to check on you. What would be the best time and phone number to call you on?”

“We have a symptom monitoring log that we can share with you that will help you track your daily symptoms checks. If you have your pen ready, I will share the web address that you can download it. That address is [insert CD Manual Address].”

“If you do develop any symptoms, isolate immediately. Isolation means avoiding contact with or sharing common spaces with other people. This includes you having a private bedroom and bathroom that are not shared with others. After isolating, please immediately call the NC Public Health Epidemiologist On-Call at 919-733-3419 to let them know you have developed symptoms. They are available 24/7.”

“Call a doctor or seek Emergency Medical Services (EMS) if at any time during monitoring you require urgent medical attention and/or develop symptoms requiring urgent medical care. Call ahead and get instructions from the provider before arriving at the medical office, clinic, or hospital. If calling 911, prior to medic/first responder arrival, notify them that you may have been exposed to Ebola, so that arrangements can be made to prevent possible transmission to others who are providing emergency care.”

## Section 6: Demographics and Contact Information

“At this point, we have gone through your symptoms and travel history, and provided you information on what to expect and what your next steps are. Okay, the last thing I need from you is just some general demographic information which helps us learn how diseases are affecting people in different groups.”

“May I ask how you identify your gender, race, and ethnicity?”



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## Section 7: Wrapping Up

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“What other questions can I answer for you now?”

### CLOSING THE CALL:

“If you think of any questions after this call has ended, you can contact the NC Public Health Outreach Team at (844) 628-7223 between 8am to 6pm. When the recording starts, select extension 8 immediately and ask for me [insert your name].”

“Thank you for your time today and for answering my questions. We are here to help, so please do not hesitate to reach out with any questions.”

Allow the traveler to respond; answer accordingly.