Enhanced Airport Entry Screening and Active Post-Arrival Monitoring for People Traveling to the United States from Mali

Summary

On November 13, 2014, the Centers for Disease Control and Prevention (CDC) released a travel alert (Level 2) for Mali following reports of a cluster of Ebola cases in Bamako, Mali, that were linked to a man who had become sick in Guinea and traveled to Bamako, Mali. CDC is working with the government of Mali, the World Health Organization (WHO), and other partners to control further spread of Ebola in Mali. In addition, CDC is working with the Department of Homeland Security (DHS) to expand enhanced entry screening at U.S. airports and post-arrival monitoring of people whose travel originates in Mali.

The purpose of this HAN Advisory is to inform public health officials and the public of the following additional precautions taken to reduce the risk of Ebola cases entering the United States from Mali:

- Effective Monday, November 17, people arriving into the United States whose travel began in Mali are subject to the same enhanced entry screening activities, including health and Ebola exposure assessments that are already in place for travelers from Guinea, Liberia, and Sierra Leone.
- All travelers entering the United States from Mali are subject to the 21-day active post-arrival monitoring and movement protocols now in effect for travelers from Guinea, Liberia, and Sierra Leone, with twice-daily temperature and symptom checks in coordination with state or local public health authorities.

Background

CDC is working closely with other U.S. government agencies, WHO, ministries of health, and other international partners in a global emergency response to the current epidemic of Ebola in Guinea, Liberia, and Sierra Leone. Beginning in October 2014, a series of actions were taken to reduce the risk of air travelers with Ebola entering the United States undetected, particularly if they are symptomatic. Almost all travelers from Guinea, Liberia, and Sierra Leone to the United States are now routed through one of five airports (New York JFK, Newark, Washington-Dulles, Chicago-O'Hare, and Atlanta Hartsfield-Jackson) where enhanced entry screening is conducted by DHS and CDC. All travelers are evaluated according to their risk level of exposure to Ebola while they had been in Guinea, Liberia, or Sierra Leone. Travelers also undergo active post-arrival monitoring, which means that those without fever or symptoms consistent with Ebola (e.g., muscle pain, fatigue, diarrhea, vomiting), and who are not considered as high risk and allowed to travel to their final destination are followed up daily by state and local health departments for a period lasting 21 days from the date of their departure from West Africa. People who are symptomatic are isolated and medically evaluated. CDC is providing assistance with active post-arrival monitoring to state and local health departments, including information on travelers arriving in their states, and upon request, is providing technical support, consultation, and funding.

Since November 10, CDC has been working with WHO and other partners in response to reports of a cluster of Ebola cases in Bamako, Mali. The cluster of cases in Bamako is linked to a man who had traveled to Bamako after becoming sick in Guinea. Public health authorities in Mali and Guinea are actively investigating a number of confirmed cases of Ebola in Mali in recent days. CDC has deployed a team of experts to Mali to assist in the investigation and control efforts. On November 13, CDC released a travel alert (Warning, Level 2) recommending that travelers to Mali protect themselves by avoiding contact
with the blood and body fluids of people who are sick because of the possibility such persons may be sick with Ebola.

As a further precaution, CDC and the DHS have added Mali to the list of nations (i.e., Guinea, Liberia, Sierra Leone) for which enhanced screening and active post-arrival monitoring measures will be taken.

Precautionary Measures Implemented

Effective Monday, November 17, people arriving in the United States whose travel began in Mali are subject to the same enhanced entry screening activities, including health and Ebola exposure assessments, which are already in place for travelers from Guinea, Liberia, and Sierra Leone.

In addition, all travelers entering the United States from Mali are subject to the 21-day active post-arrival monitoring and movement protocols now in effect for travelers from Guinea, Liberia, and Sierra Leone, with twice-daily temperature and symptom checks in coordination with state or local public health authorities.

DHS will work with the airlines to ensure re-routing for the few travelers from Mali not already scheduled to land at one of the five airports in the United States (New York JFK, Newark, Washington-Dulles, Chicago-O’Hare, and Atlanta Jackson-Hartsfield) that are already performing screening on passengers from Guinea, Liberia, and Sierra Leone.

For More Information

**For Missouri providers; Questions can be directed to DHSS’ Bureau of Communicable Disease Control and prevention at 573/751-6113, or 800/392-0272 (24/7).**

For additional information about the Ebola epidemic in West Africa, visit CDC’s website at http://www.cdc.gov/vhf/ebola/.

The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations.

Categories of Health Alert Network messages:

- **Health Alert**: Requires immediate action or attention; highest level of importance
- **Health Advisory**: May not require immediate action; provides important information for a specific incident or situation
- **Health Update**: Unlikely to require immediate action; provides updated information regarding an incident or situation
- **HAN Info Service**: Does not require immediate action; provides general public health information

This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations