

TIP SHEET For Local Boards of Health

Ebola Traveler Monitoring 2026 v1.1 7/10/26

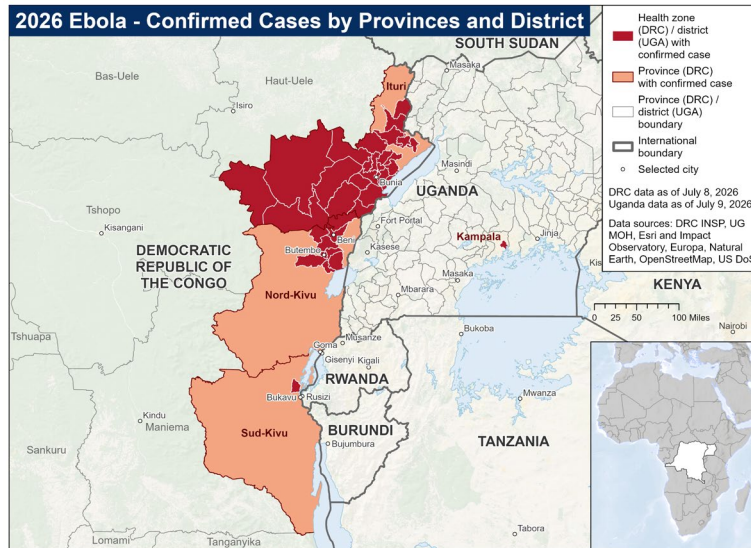
Pathogen: Bundibugyo (“Bun-dee-BOO-joh”) virus causing Bundibugyo virus Disease (BVD) or Ebola Disease

Incubation period: 2 to 21 days after exposure to develop symptoms

Infectious period: contagious only after [symptom](#) onset

Transmission: spread through direct contact (through broken skin or mucous membranes) with the body fluids (e.g., blood, urine, feces, saliva, semen, or other secretions) of a person who is sick with or has died from Ebola disease. Can also be transmitted from infected animals or through contact with objects that are contaminated with the virus. Not airborne.

No treatment or vaccine for BVD.



Countries affected by 2026 Ebola Outbreak: Democratic Republic of Congo (DRC), Uganda and South Sudan

This is an evolving situation, and public health recommendations will likely change as we learn more

[CDC | Current Situation](#) | [CDC Interim Travel Monitoring Guidance](#)

LBOH Role:

- Conduct intake and check-in assessment(s) with travelers returning from the DRC, Uganda, and South Sudan to local MA jurisdiction for 21-day monitoring period following last day in affected area.
- Notify DPH via the 24/7 DPH Epi line at 617-983-6800 if travelers become sick during their monitoring period or plan to leave Massachusetts to finish the remainder of their monitoring period out of state or out of the US.

DPH Role:

- Notify LBOHs of travelers needing monitoring in their jurisdiction via MAVEN Tasking and coordinate assessments/follow-up.
- Report final monitoring outcome of travelers to CDC.
- Provide situational updates to the LBOHs.

Traveler Monitoring Steps:

Currently DPH is only receiving travelers who are NOT high risk from CDC. Traveler Monitoring will be a coordinated effort between DPH and LBOH. The monitoring process has two components:

1. The Massachusetts Intake Assessment
2. Check-in(s) (cadence based upon Table 1 (see page 4))

MAVEN Guidance for Traveler Monitoring:

- **Notification of Traveler Assignment:** LBOH Jurisdictions will be notified of new traveler assignments via TASKING. Contact Events do not appear in LBOH notification workflows, however they should be accessible in your TASKS workflows and/or by looking up the MAVEN IDs directly.
- **MAVEN Event: “Viral Hemorrhagic Fevers”**
 - Travelers monitored for potential Ebola exposure will have a Viral Hemorrhagic Fevers (VHF) disease event in MAVEN.
- **MAVEN Event Status: “Contact”**
 - Travelers with recent history in an affected area of the world will be listed as “Contacts” in MAVEN, but this does not indicate a known exposure to Ebola virus.
- **MAVEN Question Package (QP) for Intake and Check-Ins: “VHF_CONTACT_MONITORING_2026 – Ebola Travel Monitoring QP”**
 - Record all successful Intake and monitoring Check-ins with the traveler in the designated Ebola Travel Monitoring Question Package. **DO NOT UTILIZE the 07. Contact Monitoring Question Package** for this current outbreak.
- **MAVEN Administrative Question Package Steps 1-5:** Complete ADMIN QP Steps 1-5 to acknowledge event receipt and completion of follow-up activities for these travelers.

Before calling the traveler, review any CDC screening information noted by the DPH Epi in the MAVEN event notes or event attachments. Use the **Ebola Travel Monitoring Question Package** to guide your intake interview and subsequent check-ins.

The screenshot shows the MAVEN interface with a navigation bar at the top containing 'Event Data', 'Labs', 'Concerns', 'Participants', and 'Tasks'. Below this is a 'Question Packages' section with a list of packages. The packages are: 01. Administrative, 02. Demographic, 03. Clinical, 05. Risk/Exposure/Control & Prevention, 07. Contact Monitoring (crossed out with a red X), 08. Electronic Case Reporting, 09. Other External Data Sources, and 10. Sequencing Information. At the bottom of the list, 'VHF_CONTACT_MONITORING_2026 - Ebola Travel Monitoring QP' is highlighted in yellow, and a blue arrow points to it from the left.

Question Package
01. Administrative
02. Demographic
03. Clinical
05. Risk/Exposure/Control & Prevention
07. Contact Monitoring
08. Electronic Case Reporting
09. Other External Data Sources
10. Sequencing Information
VHF_CONTACT_MONITORING_2026 - Ebola Travel Monitoring QP

1. Intake Assessment (MA Intake Form):

- 1) Confirm identify
- 2) Review epi-risk factors:
 - Was the traveler in any of the following **affected countries** or **areas of concern** in the last 21 days?
 - **DRC, South Sudan, and Uganda: Entire country is area of concern**
 - **New 7/7/26** - travelers **with connecting flights** through **affected countries** should receive an intake assessment (including those only in the airport & those who did not deplane). The intake assessment is used to confirm CDC-reported information & provide contact information to the traveler, but further check-ins for travelers with only connecting flights in affected countries are not required at this time. (See Table 1)
 - *Note: List of affected countries/areas of concern may be updated over time.*
 - Verify the **last date the traveler was in the affected country** to determine end of 21-day monitoring period. (Last Date in affected country=Day 0; Last Date of Monitoring=Day 21).
 - **Review exposure potential screening questions** - In the last 21 days, while in [affected country]:
 - A. Did you go into any healthcare facility, such as a hospital, clinic, or visit a traditional healer?
 - B. Did you provide health care, perform lab work, clean, or handle waste in a healthcare setting?
 - C. Did you have contact with or were you near a sick person with fever or other acute illness?
 - D. Did you come into contact with anyone's blood or other body fluids, such as vomit, saliva, feces, or urine?
 - E. Did you touch a dead body, prepare a body, attend a funeral, or perform burial work?
 - F. Did you have contact with a bat, monkey or ape (alive or dead)?
 - G. Did you go into a mine or a cave?
 - H. Did you have known exposure to a patient or household member with confirmed or suspected Ebola and/or direct exposure to bodily fluids containing Ebola Virus? (*High Risk. Contact DPH.*)

If the traveler answers yes to A-H of the exposure potential screening questions, gather more detail and document in the notes.
- 3) Review **symptoms** of Ebola and ensure that all travelers know how to self-monitor
 - **Symptoms:** fever, severe headache, muscle or joint pain, weakness/fatigue, sore throat, loss of appetite, rash, unexplained bleeding, GI symptoms (diarrhea, nausea, vomiting, abdominal pain)
 - **Does the traveler currently have any of the listed symptoms?**
- 4) Ask if they have any scheduled **out-of-state travel** during their monitoring period. Obtain details.
 - **Out of State:** If a traveler indicates travel to another state for the remainder of their monitoring period, please notify your assigned Epi.
 - **Out of Country:** As of 6/4/26, CDC discourages international and cruise ship travel during the 21-day monitoring period because of outbreak restrictions in other countries and access to healthcare if they were to get sick. If the traveler insists on leaving, please notify your assigned Epi. LBOHs do not need to monitor travelers further if they depart the US.

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- 5) **Provide traveler with 617-983-6800** to call if they become sick or make new plans to travel outside Massachusetts during their monitoring period.
- 6) **Establish a plan for check-in(s)** based on risk assessment and traveler's preferred method of communication (phone/text/email). Refer to Table 1 below for recommended check-in cadence.

Table 1: Monitoring recommendations for asymptomatic travelers with no-high risk exposures:

	Monitoring Criteria		
	Category A In area of concern with exposure potential [^]	Category B In area of concern without exposure potential [^]	Category C Connecting flight through affected country
Intake	Conduct risk assessment, determine risk category and provide health education		
	Advise self-symptom monitoring + daily temperature measurement		
Check-in Cadence	At least once a week	One check-in on the last day of monitoring (21 days after leaving affected country)	Only intake is required; Check in optional

[^]**Exposure Potential** refers to traveler's answers to questions A-H.

- 7) Update the **Ebola Travel Monitoring** Question Package with information received from the traveler.

When to notify your assigned DPH Epi (contact information in Epi note) or 617-983-6800:

- If you are concerned about an exposure potential or situation.
- If a traveler indicates a high-risk exposure (known exposure to patient or household member with confirmed or suspected Ebola and/or direct exposure to bodily fluids containing Ebola Virus) during their intake assessment, notify DPH at 617-983-6800 (this would be rare).
- If the traveler did not spend any time in the DRC, South Sudan or Uganda in the last 21 days, no additional follow-up is needed. Note this in the event.
- If the traveler is symptomatic on intake or check-in.
- If the traveler plans to leave Massachusetts for the remainder of their monitoring period.

2. Check-In(s):

- Document each successful check-in within the Ebola Travel Monitoring question package. If you are unable to reach the traveler but wish to document your attempts, leave a note in the dashboard notes section. Reserve "Successful Check-In" entries for completed communication & symptom checks with the traveler.
- Check-in includes asking:
 - If they have experienced any symptoms since you last contacted them.
 - If so, obtain information (symptoms, onset, any care received) and contact 617-983-6800.
 - If they have established any out-of-state travel plans since you last communicated with them.

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- If the traveler does not respond to your Intake and/or Check-In attempts despite you reaching out on different days, different times, and via different forms (email, phone call, or text) you can send a certified letter. If there is no response to the letter, indicate this in the final monitoring period outcome variable. [Sample letter](#) text is available in MAVEN Help.

Final Check-In:

- Update the **Final Monitoring Period Outcome variable** in the **Ebola Travel Monitoring QP** with the final outcome:
 - Successfully monitored for the recommended time period
 - Intake complete, no check-in(s)
 - No intake, no check-in(s)
- Mark Administrative Question Package Step 4 Case Report Form Completed Variable to “yes.”

Helpful Tools:

- Live Interpreter Services: Language Line Solutions 866-874-3972; LBOH code: **684959**