Instructions for EXIT Form

The Ebola Virus Disease (EVD) Risk Assessment for UN Staff EXITING Countries with Transmission of Ebola Virus MUST be completed by a member of a UN Medical Service, that is, a UN-certified doctor or nurse.

Upon a staff member's arrival at medical service, his or her temperature should be taken in order to determine whether or not PPE should be worn during the appointment. If the patient presents fever, PPE should be worn, following local SOP, if not, standard practice should be followed.

This form must be completed no more than 48 hours prior to staff member's departure from EVD-affected country. If staff member arrives more than 2 days before their trip, ensure that they return to the medical service during this 48 hour window.

Section A, Personal Details need not be completed by a UN-certified doctor or nurse, this is the ONLY section that be filled by the staff member

Section B, Signs and Symptoms should be done in a question and answer format. The doctor or nurse should ask the staff member if they have any of listed symptoms. Please mark either the "Yes" or "No" column according to the staff member's answers. If there is any relevant information pertaining to the particular sign or symptom, the "Comment" column is intended to provide you a space for explanations.

Once the list of symptoms is completed, take the time to ask the staff member whether they have experienced any other symptoms. Specify these symptoms in the provided space below the chart. If the staff member answers "Yes" to any of the symptoms listed within the chart, it is imperative that you note the approximate date of onset of these symptoms. This will allow you to better assess the severity of the situation.

Once you've conducted the inquiries of EVD-compatible symptoms, use your clinical judgment to classify the symptoms as either:

- □ Symptoms compatible with EVD
- □ Symptoms compatible with non-EVD condition. Specify condition:
- □ Asymptomatic

If, for instance, the staff member has experienced difficulty breathing (an EVDcompatible symptom) and has a history of asthma, and has no other EVDsymptoms, then you would classify this person as:

"Symptoms compatible with non-EVD condition. Specify condition: Asthma"

Section C, Assessment of Epidemiological Risk Factors, aims to find any exposure that the staff member had with EVD. Once more, this section should be conducted in a question and answer style. "In the past 21 days, have you:

______." Just as in Section B, please mark either the "Yes" or "No" column according to the staff member's answers. If there is any relevant information pertaining to the particular exposure risk, the "Comment" column is intended to provide you a space for explanations. For some of the questions, it is important to know whether the staff member was wearing PPE. The last question of this section is meant to be a "catch all," if for some reason the staff member has any doubt regarding their exposure to bodily fluids.

Based on the answers to these exposure risk questions, use your clinical judgment to classify the staff member using the categories below according to their requirements:

- □ High Exposure Risk
- □ Low Exposure Risk
- □ No Identifiable Exposure Risk

Section D, Final Assessment, is based on both the exposure risk and the signs and symptoms. Based on the answers obtained from Sections B and C, use your clinical judgment to classify the staff member using the categories below according to listed criteria

- □ EVD Suspect case
- □ Sick Person, non –EVD case
- □ Asymptomatic contact
- Asymptomatic Person with NO Identifiable Exposure Risk

You must follow appropriate response according to the category in which the staff member falls following local SOPs and guidance.

Once completed, keep a copy of the form in the office, give the staff member a physical copy (just in case there are multiple legs to their trip or more than one duty station will be visited) and e-mail a copy to the staff member's Duty Station Medical Service.

Please feel free to contact MSD at msdpublichealth@un.org or +1-917-367-3391 should you have any questions.