

Since October 22, 2014, the Michigan Department of Health and Human Services (MDHHS) and Michigan's local health departments (LHDs) have collaborated on the monitoring of individuals returning to Michigan with recent travel in a country with widespread Ebola transmission*. The Department of Homeland Security (DHS) requires these travelers to enter the United States through one of five designated international US airports of entry, where they are provided with a Check and Report Ebola (CARE) kit containing a thermometer, temperature and symptoms log, and contact information for the health department of their destination state. MDHHS is notified of new travelers on a daily basis via Epi-X and, in turn, notifies the appropriate LHD. The LHD initiates monitoring immediately and then sends data back to MDHHS daily for tracking and summarization.

A standard 21-day monitoring period is used, beginning from the last date of potential exposure and covering the incubation period for Ebola. Each traveler is contacted daily to collect temperature readings and inquire on the development of any symptoms consistent with Ebola, ensuring that an infected individual would be identified as early as possible so that control measures can be implemented to prevent further transmission. The LHD and the traveler also agree on a medical facility where the traveler would go if they become symptomatic during their monitoring period. Pre-designating this facility allows the LHD to notify the facility and discuss the coordination of care.

Daily monitoring can be of two types, active or direct active, and is determined by the traveler's epidemiologic risk. Currently, active monitoring is used for low risk travelers (having been in a country with widespread Ebola in the past 21 days but no close or direct contact with a case and was not working as a healthcare worker in the country) and involves once daily contact by phone, e-mail, or electronic visualization. Direct active monitoring requires twice daily contact with the traveler, one of which must be in-person or through electronic visualization (e.g., Skype or FaceTime), and is used for higher risk individuals who have had close or direct contact with an Ebola case and/or was a healthcare worker in a country with widespread Ebola.

Regional Epidemiology Unit (REU) staff maintains a database of Michigan's monitored travelers. One summary tool developed by REU utilizes a Gantt chart which gives a visual representation of current monitoring efforts. The chart provides an overview of the number of travelers currently under monitoring, how many are active or direct active, and the proportion of each traveler's monitoring that has been completed.

As of June 26, 2015, 282 travelers have been monitored in Michigan, 12 of which required direct active monitoring. New referrals for traveler monitoring have been received in each of the last 36 weeks, with a range of 2-16 referrals per week. Michigan LHDs have logged a total of 4,412 person-days of monitoring; with the highest number of referrals coming from the most populated areas of the state.

Monitored travelers have a median age of 43 years and have been 63% male. Travel to Liberia accounted for 46% of monitored individuals and 133/282 (47%) are U.S. citizens based on passport country. Travelers were distributed across the 5 designated U.S. airports of entry, with the highest number coming to Michigan from JFK International Airport in New York.

All travelers monitored to date have been successfully contacted. No traveler in Michigan has been classified as a person under investigation for Ebola and no traveler in Michigan has been tested for Ebola. MDHHS will continue monitoring travelers in coordination with the LHDs until CDC discontinues the program. In all likelihood, this will occur when the Ebola outbreak in West Africa is declared to be over. More information on Ebola preparedness and the Traveler Evaluation and Monitoring program in Michigan can be found at www.michigan.gov/ebola.

* Guinea and Sierra Leone (October 22, 2014-present), Liberia (October 22, 2014-June 17, 2015), and Mali (November 17, 2014-January 5, 2015)