Special Pathogens Questionnaire for Persons Under Investigation

This list serves as a guide for clinical team members to gather and share relevant information with the RESPTC Team for activation.

- Pathogen Under Investigation
- Patient MRN
- Travel Location (Include country, state, city, etc.)
- Travel Dates
- Reason for Travel (ex medical missions, work, leisure, etc.)
- Symptoms
- Symptom Onset
- Any known exposures to infected humans or animals
- Unusual food consumption?
    - If yes, what was consumed? (e.g. bushmeat, raw meats)
- Exposure to local animals?
    - If yes, what animals and level of exposure? (e.g. kissing a camel)
- Participation in any activities? (e.g. hunting, fishing, cave exploration)
- Alternative Diagnoses and if Ruled Out

Infection Prevention Resource Tool for Viral Hemorrhagic Fevers

What	Symptoms	Incubation period	Who's at risk?	Additional info
Crimean Congo	Sudden onset fever, myalgia, dizziness, neck pain/stiffness, headache, sore eyes, photophobia, nausea, vomiting, diarrhea, sore throat. Sharp mood swings and confusion can be present early on, switching to sleepiness and depression around days 2 to 4. Petechial rash may be found in the mouth, throat, and on skin, and progress to larger bruising. Symptoms become increasingly severe.	1 – 14 days (Tick bite: 1 – 9 days)	Higer risk for travelers with any of the following: • Experienced tick bites in an endemic area • Close contact with livestock, particularly those being slaughtered • Providing healthcare to the local population without PPE	Locations of concern, diagnosis, treatment: Crimean Congo
Ebola	Sudden onset fever, fatigue, malaise, muscle pain, headache, sore throat. Followed by vomiting, diarrhea, abdominal pain, rash, impaired kidney and liver functions. Bleeding is a less frequent symptom and occurs in the later stages of disease. Symptoms become increasingly severe.	2 – 21 days (Average: 8 – 10 days)	Higher risk for travelers with any of the following: • Providing healthcare to the local population without PPE • Contact with bats or non-human primates • Bushmeat consumption • Attendance at burial ceremonies	Locations of concern, diagnosis, treatment: Ebola Virus
Lassa Fever	Gradual onset fever, general weakness, headache, malaise. After a few days, sore throat, muscle pain, chest pain, nausea, vomiting, diarrhea, cough, abdominal pain may occur. As disease progresses, facial swelling and bleeding occur. Symptoms become increasingly severe.	2 – 21 days	Higher risk for travelers with any of the following: • Contact with Multimammate rats or their urine and/or droppings • Living/staying in a location with a large rat population • Consumption of rats • Providing healthcare to the local population without PPE	Locations of concern, diagnosis, treatment: Lassa Fever
Marburg	Sudden onset fever, chills, headache, myalgia. Around 5th day, maculopapular rash most prominent on the trunk may occur. May also have nausea, vomiting, chest pain, sore throat, abdominal pain, diarrhea. Symptoms will become increasingly severe.	2 – 21 days	Higher risk for travelers with any of the following: • Contact with Egyptian rousette bats, or their urine and/or excretions • Excursions to caves/mines • Providing healthcare to the local population without PPE • Contact with non-human primates infected with Marburg virus .	Locations of concern, diagnosis, treatment: Marburg Virus

Infection Prevention Resource Tool for Other Special Pathogens

What	Symptoms	Incubation period	Who's at risk?	Additional info
Hantavirus Pulmonary Syndrome (*Andes* virus)	Fatigue, fever, muscle aches, headaches, dizziness, chills, nausea, vomiting, diarrhea, abdominal pain. Approximately 4-10 days after illness onset, the patient may develop shortness of breath, difficulty breathing, cough, and respiratory failure.	4 – 42 days	Higer risk for travelers with any of the following: • Contact with rodents or their urine, saliva, or feces • Travel in South America, predominantly in Argentina and Chile • Close, prolonged contact to an individual infected with *Andes* virus with no PPE • **Only the *Andes* virus is known to spread person-to-person**	Locations of concern, diagnosis, treatment: Hantavirus **Sin Nombre* hantavirus is associated with cases contracted in the United States from deer mice. *Sin Nombre* hantavirus is not known to spread person-to-person.
Mpox	May present with flu-like symptoms (fever, chills, headache, muscle aches, fatigue) followed by rash or rash first with flu-like symptoms following. Some will not get a rash at all. Rash may be widespread or isolated, found on your mouth, face, hands, feet, penis, vagina, and/or anus, and can go through several stages: Flat red spots → hard raised bumps → blister with clear fluid → filled with pus → crust over and become scabs.	5 – 21 days	Higher risk for travelers with any of the following: • Contact with rodents or primates • Close, intimate, or sexual contact with others with a skin rash or known mpox • Providing healthcare to the local population without PPE • Disproportionately affects the men who have sex with men (MSM) community	Locations of concern, diagnosis, treatment: Mpox
MERS – Middle East Respiratory Syndrome	Fever, cough, shortness of breath, chills, headache, myalgia. Possible diarrhea, nausea, and vomiting. In most known cases, the patient will develop pneumonia.	2 – 14 days	Higher risk for travelers with any of the following: • Travel in/around the Arabian Peninsula • Direct physical contact with dromedary (1 hump) camels, including touching or grooming • Consumption of camel products including raw milk, urine, or meat • Providing healthcare to the local population without PPE	Locations of concern, diagnosis, treatment: MERS