

FOR UNMIL USE ONLY: DATE TRAVELED (ddmmyy): \_\_\_\_\_ LOCATION TRAVELING \*FROM\*: \_\_\_\_\_

**UNMIL Medical Section**  
**Self-Assessment for NON-UN Personnel EXITING OUT FROM**  
**Liberian Counties That Currently Have Suspect/Confirmed Ebola Cases**

(For details of current areas that have suspected/confirmed cases, and their locations see  
<http://www.who.int/csr/don/archive/disease/ebola/en/>)

*This form is to be completed by non-UN personnel for self-assessment no more than 3 days BEFORE travel, to assist in determining whether s/he has had any exposure that could put them at risk of contracting/spreading Ebola Virus Disease. It aims to ensure that non UN personnel are fully compliant with all UNMIL outbreak management activities, including contact tracing, isolation and quarantine, where deemed necessary.*

*The form will be collected at the point of embarkation/pickup by the first UNMIL point of contact prior to boarding UNMIL travel assets, e.g. UNMIL MovCon Desk Personnel at check-in for flights, or UNMIL Transport Driver at pickup in a vehicle.*

Date and Time of this Assessment (dd/mm/yy): \_\_\_\_\_

**A). NON-UN PERSONNEL DETAILS**

First Name: \_\_\_\_\_ Last  
Name: \_\_\_\_\_

Identification No. \_\_\_\_\_ DOB(DD/mm/yy): \_\_\_\_\_

Sex:M/F Current Duty Station: \_\_\_\_\_ Organization/Office: \_\_\_\_\_ Title:  
\_\_\_\_\_

Email: \_\_\_\_\_ Tel No: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Tel No: \_\_\_\_\_

**B) TRAVEL HISTORY**

In the last 3 weeks, have you travelled to a specific locality / area that currently has suspect/confirmed Ebola case?

Yes  No  Unknown If yes or unknown, please specify which  
Country/City/Region/Town: \_\_\_\_\_

**C) CURRENT HEALTH STATUS**

Please check off whichever applies:  I am currently well, and have no signs and symptoms  
 I am currently unwell, and have signs and symptoms

**D) ONLY COMPLETE THIS SECTION IF YOU ARE UNWELL**

**SIGNS AND SYMPTOMS**

Date of onset of first symptoms (dd/mm/yy): \_\_\_\_\_ Was onset of symptoms sudden or gradual?  Sudden Onset  Gradual

Please indicate if you have these signs and /or symptoms:

SIGNS AND SYMPTOMS	YES	NO
Fever in the last 3 days		
Headache		
Rash		
Body Aches		
Cough		
Sore throat		
Vomiting		
Diarrhea		
Bleeding from the ears		
Bleeding from the nose		
Bleeding from the mouth		

If other symptoms please specify:

\_\_\_\_\_

**E) EXPOSURE HISTORY**

IN THE PAST 21 DAYS, HAVE YOU:	Yes	No
... had contact with body fluids of a live or dead person known or strongly suspected to have Ebola Virus Disease either directly (such as you've handled blood, urine), or indirectly (such as you've handled soiled clothing or bedding)?		
... had close contact with a live or dead person known or strongly suspected to have Ebola Virus Disease?		
... been involved in funeral preparations for a person known or strongly suspected to have Ebola Virus Disease?		
... handled clinical/laboratory specimens (blood, urine, faeces, tissues, laboratory cultures) from a live or dead person or animal known or strongly suspected to have Ebola Virus Disease?		
... come into contact with the body fluids of or have you had direct contact with a live or dead person or animal, known or strongly suspected to have Ebola Virus Disease (e.g. routine patient care, transport of patient, resuscitation, autopsy)?		
... received any intra-muscular or intra-venous injections in an Ebola outbreak area?		
... handled or butchered dead primates or been involved in drying, smoking their meat or eating their meat in an Ebola Virus Disease outbreak area?		

I certify that the above answers given are correct to the best of my knowledge.

SIGNATURE OF TRAVELLER: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_

<p>Should you have any further questions, contact UNMIL's Doctor-on-Call at 07731 9000 or the UNMIL Chief Medical Officer at 077031 9445</p>	<p><b>INSTRUCTIONS TO UNMIL STAFF RECEIVING THIS FORM FROM A NON-UN TRAVELER</b></p> <p>Use this form in conjunction with your pocket guide of visual signs to observe any person(s) wishing to travel on UNMIL assets. If you have any concerns, take the action indicated on your card.</p> <p>If still in doubt, <b>stop the boarding</b> and call the <b>UNMIL Doctor-on-Call at 077031 9000</b> for advice.</p>
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