

Effective Date (<i>original issue</i>)	February 1, 2016
Revision Date (<i>most recent</i>)	March 21, 2022
Subject Matter Expert	Emilio R. Gonzales, MPH Emerging and Acute Infectious Disease Unit Epidemiologist
Signed by	Emilio R. Gonzales

Monitoring of Persons with Potential Exposure to Avian Influenza (AI) Checklist

Please note all email communications should be sent to Central office at FluTexas@dshs.texas.gov AND to the appropriate Regional office contacts for your jurisdiction.

Initial Phone Call

Determine if the individual is currently in Texas.

○ If yes, obtain exact address in Texas:

○ If no, determine the exact address where the traveler is currently located. If the traveler plans to come to Texas eventually find out when and where (exact address) the traveler will arrive and report to DSHS.

Were you able to make contact with the individual after multiple attempts? Yes No

○ Notes on unsuccessful attempts to reach individual:

Confirm contact information.

○ Best contact phone number: _____ Okay to text? Yes No

○ Secondary contact phone number: _____ Okay to text? Yes No

○ Emergency contact phone number: _____ Okay to text? Yes No

○ Email address: _____

○ Secondary/emergency contact email address: _____

Verify Exposure Date.

○ Date last exposed to poultry? _____

○ Date last involved with USDA/APHIS response? _____

○ Date arrived/arriving in Texas? _____

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- Inform the individual of the monitoring process in Texas and establish their risk level using the risk level classification table below.

Risk Level	Description	Monitoring recommendation
Low (but not zero) risk	An individual involved in response activities associated with an HPAI-infected flock but who did not have contact with bird populations (e.g., worked at incident command, administrative role).	Monitoring at Day 0, 5, and 10 of the incubation period. Initial and final contacts must be made by phone. Note: For transfers from other jurisdictions initial contact should be made by the receiving health department regardless of the monitoring day.
Some risk	An individual involved in response activities associated with an HPAI-infected flock who had exposure to the infected facility and/or participated in response and depopulation activities while wearing appropriate personal protective equipment (PPE) at all times.	Once daily monitoring by phone, text, or email on each day of the 10-day monitoring period. Initial and final contacts must be made by phone. *
High risk	An individual involved in response activities associated with an AI-infected flock who: <ul style="list-style-type: none"> • had exposure to the infected facility and/or participated in response and depopulation activities AND • had a known breach in PPE, OR an unknown level of PPE coverage at any point during flock exposure. 	Once daily monitoring by phone, text, email on each day of the 10-day monitoring period. Initial and final contacts must be made by phone.*

- Provide them with their date of completion of monitoring (Individuals will be monitored for 10 days after their last exposure to any avian influenza response activity of any kind. This date of last exposure is day 0, monitoring is conducted for 10 days after day 0).
- Establish best contact method and time.
- Best contact method: _____
 - Best contact time: _____
- Confirm that the individual was provided demobilization instructions including symptoms to watch for.
- If the individual did not receive instructions determine the best email with which to provide them. _____

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- Ask if the individual is currently experiencing any of the following symptoms (if yes additional follow-up required):
- Fever (Temperature of 100°F [37.8°C] or greater) or feeling feverish/chills
 - Diarrhea
 - Cough
 - Nausea
 - Sore throat
 - Vomiting
 - Runny or stuffy nose
 - Fatigue
 - Sneezing
 - Seizures
 - Muscle or body aches
 - Rash
 - Headaches
 - Eye tearing, redness, irritation
 - Difficulty breathing/Shortness of breathe
- Ask if the individual has any plans to travel in the next two weeks (if yes complete travel form) and send form to FluTexas@dshs.texas.gov immediately.
- Provide the individual with LHD contact information and 24/7 emergency contact information in case they develop symptoms.
- Inform the individual that you will contact them again via phone, text message, or email daily unless less frequent contact is deemed appropriate.
- Thank the individual for their time.

*Send email notification to FluTexas@dshs.texas.gov to confirm contact with the PUM. Include:

- CDC ID
- Date of last risk exposure (for calculation of 10-day monitoring period)
- End date of monitoring
- If the PUM reported any information that might change their risk status, includedetails.

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For routine PUM monitoring calls

- Confirm the PUM is still in your jurisdiction. If not, collect jurisdiction information on the “AI Responder Notification of Travel” form and send to FluTexas@dshs.texas.gov immediately.
- Ask if the PUM is experiencing any signs of symptoms of influenza-like illness (Review symptoms). If yes, review the Symptomatic PUMs section of "Monitoring Guidance for AI responders."
- Ask if they have any upcoming travel plans within the state of Texas or out of the state of Texas. If yes, complete “AI Responder Notification of Travel” form and send to FluTexas@dshs.texas.gov immediately.
- Thank the PUM and confirm follow up method and time for the next schedule monitoring day.
- Complete daily monitoring log.

For final monitoring call (closeout)

- Ask if the PUM is experiencing any signs of symptoms of influenza-like illness. Review symptoms if needed. If yes, additional follow up is required.
- Inform the PUM that this is their final day of monitoring and that no additional contact will be required.
- Thank the PUM for their time and provide them with LHD contact information should they have any follow-up questions.
- Complete the daily monitoring log electronically and email to DSHS within 48-hours.

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Special Situations:

For PUMs Reporting Symptoms obtain the following information:

- When did symptoms begin? _____
- Has the individual received medical care or treatment for any of their symptoms?
 - If yes, describe treatment _____

- Is there anyone else living in the household or spending significant amounts of time in the household? _____
 - If yes, do any other members of the house currently have symptoms? _____
 - If yes, who has symptoms and when did they begin? _____

- If the individual does not need immediate medical care instruct them to self-isolate while follow-up and/or testing is arranged.
- If the individual does need medical care, coordinate with local health care facilities and/or EMS as needed. In an emergency, PUM should report to a healthcare facility without delay.

For PUMs reporting travel obtain the following information:

- Upcoming travel destination (Street address, city, state)

- Dates of travel (if multiple locations, obtain departure and arrival dates for each location)

- Complete "Avian Influenza Responder Notification of Travel" form and submit to FluTexas@dshs.texas.gov immediately.