Patient phones asking for a home visit as they feel too unwell to attend the surgery

A) Does the patient have a fever [>38°C] or history of fever in past 24 hours
AND
in the past 21 days, has the patient travelled to or transited through an affected country (Guinea, Liberia or Sierra Leone)
OR
B) Does the patient have a fever [>38°C] or history of fever in past 24 hours
AND
in the past 21 days, has the patient cared for/ had contact with a confirmed or strongly suspected case of Ebola OR handled specimens or dead body of a confirmed/suspected case of Ebola

NO to A & B

If a GP suspects Ebola once already at the patient's home, seek urgent advice from the local infectious disease physician or Health Protection Team

Ebola unlikely; consider alternative diagnoses (eg malaria) & clinical review

YES to A and/or B

Advise the patient to isolate themselves at home
DO NOT conduct a home visit
GP to establish symptom history eg headache, weakness, muscle pain, vomiting, diarrhoea, abdominal pain or haemorrhage
Does the patient have uncontrolled vomiting, uncontrolled diarrhoea, extensive bruising or active bleeding?

Patient unwell and at significant risk of Ebola infection

YES

Contact ambulance service for patient transfer to hospital for clinical assessment: advise ambulance service re potential Ebola risk.
Inform Infection Consultant that patient has been referred by ambulance for further assessment

Does the patient seem relatively well? Mild or minor symptoms only?

YES

Agree with the Infection Consultant whether the patient attends local Emergency Department for assessment or has telephone consultation with the Infection Consultant; patient may use own transport (not public transport) for travel to hospital for assessment