

2022 Ebola Airport Entry Questionnaires
Request for OMB approval of a New Information Collection
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Supporting Statement B

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No statistical methods are used in this data collection.

1. Respondent Universe and Sampling Methods

The respondent universe for this requirement is travelers from areas affected by the 2022 Ebola Outbreak originating in Uganda.

2. Procedures for the Collection of Information

The Centers for Disease Control and Prevention (CDC), National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Division of Global Migration and Quarantine (DGMQ) requests an emergency 180-day approval for a new information collection.

Section 361 of the Public Health Service (PHS) Act (42 USC 264) (Attachment A1) authorizes the Secretary of Health and Human Services to make and enforce regulations necessary to prevent the introduction, transmission or spread of communicable diseases from foreign countries into the United States. Under its delegated authority, DGMQ works to fulfill this responsibility through a variety of activities, including the operation of Quarantine Stations at ports of entry and administration of foreign quarantine regulations; 42 Code of Federal Regulation part 71 (Attachment A2), specifically 42 CFR 71.20 Public health prevention measures to detect communicable disease. This information collection concerns CDC's statutory and regulatory authority related to conducting public health screening of travelers upon arrival to the United States and assessing individual travelers for public health risk following a report of illness from a conveyance.

CDC has been tasked with conducting public health assessments at U.S. airports of travelers coming from areas experiencing an outbreak of Ebola originating in Uganda.

The purpose of this information collection is to determine the public health risk that travelers from areas affected by the 2022 outbreak of Ebola originating in Uganda may pose. This information will be used to 1) determine if travelers have symptoms consistent with Ebola and should be isolated and medically evaluated upon arrival in the US; and 2) assist state and local health departments with understanding which travelers from the

region may be at higher risk of becoming ill with Ebola and should be prioritized for taking certain public health protection measures, such as quarantine.

CDC collects international travelers' contact information under authorities in the Interim Final Rule: Control of Communicable Diseases: Foreign Quarantine and CDC's Order Requirement for Airlines and Operators to Collect and Transmit Designated Information for Passengers and Crew Arriving Into the United States; Requirement for Passengers to Provide Designated Information.^{3,4} Traveler contact information is sent to CDC through an existing data-sharing infrastructure in place between the United States Department of Homeland

Security (DHS) and HHS/CDC and approved for in OMB Control 0920-1354. Contact information for travelers who have been to an area affected by the outbreak during the 21 days prior to arrival will be confirmed at the port of entry. CDC will share contact information for these travelers with state and local health departments so that they can do possible public health follow up, including public health assessment of exposure risk and monitoring for Ebola symptoms, and education to travelers. These public health interventions will help state and local health departments determine the appropriate level of follow needed based on the traveler's level of risk and rapidly identify any travelers with symptoms that could which travelers may need to be prioritized for more targeted public health measures, such as quarantine, due to a higher risk of exposure to Ebola.

To implement the 2022 Ebola Entry Questionnaire information collection, CDC will first require all travelers from designated areas affected by the 2022 outbreak of Ebola originating in Uganda, to undergo an initial Ebola screening to determine if CDC needs to do further public health risk assessment or illness response at the airport.

DHS will refer travelers that have been to designated areas to another location of the airport where CDC will ask initial Ebola screening questions. DHS will also provide the contact information they have received to CDC electronically as part of the information collection under OMB control 0920-1354. CDC will escort travelers to the area of the initial Ebola screening and confirm with the traveler that the contact information on file is correct. CDC will inform DHS if there are any necessary corrections needed to the contact information.

In this initial Ebola screening setting, CDC will ask basic questions about signs or symptoms of illness (e.g., fever or vomiting or diarrhea, etc.) or possible exposure (e.g. contact with a person sick with Ebola, attendance at a funeral, etc.) as well as observe travelers to determine if the traveler is experiencing any overt signs and symptoms of disease, and measure their temperature with a noncontact thermometer.

If a traveler answers "Yes" to any of these initial screening questions, is visibly ill, or has a fever, the traveler will then be referred to another area of the airport for a public health risk assessment by CDC. The public health risk assessment will help CDC investigate further to determine if the traveler could be sick with Ebola or to get more information about a possible exposure to the Ebola virus to determine if the traveler is high-risk.

The CDC staff member doing the initial Ebola screening will escort the traveler to the new area of the airport for further public health risk assessment questions by other staff members of CDC. They will indicate the reason the traveler is being referred for further public health risk assessment to the new CDC staff member. Anybody who is visibly ill or reports signs or symptoms, or has an elevated temperature measurement, will undergo an illness investigation using the Air Travel Illness or Death Investigation or Traveler Follow up Form that is currently approved under OMB Control 0920-1318. Staff will take necessary precautions to prevent possible exposures by any ill travelers, such as wearing appropriate personal protective equipment during any illness investigation.

During the CDC public health risk assessment, CDC will ask more detailed questions about possible exposures, such as symptoms, whether they were exposed to a person with Ebola, and the nature nature of contact (e.g. provided direct health care). Depending on their symptoms and how they answer, CDC may refer the person for medical care. If CDC staff identify any travelers with high-risk exposures, management will be coordinated directly with the health departments of jurisdiction for both the airport where traveler is located and their final destination. Issuance of public health orders under federal or state authorities may also be considered. Any information from these public health risk assessments, as well as information related to an illness investigation will be recorded in CDC's Quarantine Activity Reporting System (QARS), which is covered by the System of Records Notice is 09-20-0171, Quarantine- and Traveler-Related Activities.

3. Methods to maximize Response Rates and Deal with No Response

This information is required if an individual seeks to travel by aircraft to the United States from an area affected by the 2022 Ebola Outbreak originating in Uganda.

4. Tests of Procedures or Methods to be undertaken

This is a new requirement.

5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

No statistical methods are used in this data collection. Therefore, no individuals were consulted.