Form Approved
OMB Control No: 0920-XXXX
Exp. Date: XX/XX/XXXX

[SAMPLE VHF] symptom monitoring following airport screening Weekly Group

Text Messages: [SAMPLE VHF] Outbreak

Distribution Timeline (starting noon ET)	Message from US Public Health	Process steps
(Day 0) Upon enrollment Sent at noon	US Public Health: Welcome! You are receiving this message because you recently arrived in the US from [COUNTRY], where there is a [SAMPLE VHF] outbreak. For English, reply "1"	If no reply, messages continue in English
As soon as possible after enrollment message	Watch for these [SAMPLE VHF] symptoms until 21 days AFTER you left [COUNTRY]: fever, chills, headache, muscle aches, rash, chest pain, sore throat, nausea, vomiting, diarrhea. Bleeding or bruising (not caused by an injury) can appear later in the illness. If you get sick with any of these symptoms, separate yourself from others immediately and call the health department in your area for advice BEFORE going to a healthcare facility. If you can't reach your health department, call a doctor. Tell them that you were recently in an area with a [SAMPLE VHF] outbreak. Visit [INSERT LINK] for more information. Visit [INSERT LINK] to notify the health department.	
As soon as possible after "Watch for these symptoms"	Based on the information you provided during public health entry screening at the airport, we will ask you about your health status by text message every day until 21 days after you were last in a hospital where [SAMPLE VHF] virus was spreading. Please reply to these messages. If you do not reply, a public health worker will contact you.	
Daily	This is your [weekly] public health check-in. If you do not reply, a public health worker will contact you. [Daily:] In the past day, have you had a fever (100.4° F / 38° C or higher) or felt feverish, had chills, new or unusual headache or muscle aches, rash, chest pain,	If no reply, resend message in one hour. If no final reply, then health

Public reporting burden of this collection of information is estimated to average 1 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC, Reports Clearance Officer, 1600 Clifton Rd., MS H21-8, Atlanta, GA 30333, ATTN: PRA (0920-XXXX).

	sore throat, nausea, vomiting, or diarrhea? If yes, reply "1" If no, reply "2"	department of jurisdiction will get a daily list of nonresponses.
If 2 (no), traveler will receive this message	Thank you for your response. We will check in with you again [next week].	
If 1 (yes), traveler will receive this location message plus additional symptom questions below.	Since you indicated that you have symptoms, please separate yourself from others (isolate). Click this link to provide additional information. [LINK - Attachment F - SAMPLE VHF Response Survey of Travelers] A public health worker will be in touch shortly to discuss your symptoms and provide recommendations.	
21 days after the day they were last in the HCF with transmission risk.	US Public Health: That was your final public health check-in. Today is your last day of receiving text messages for health monitoring for [SAMPLE VHF] symptoms. If you left [COUNTRY] less than 21 days ago, please continue to watch your health until 21 days after you left [COUNTRY]. Thank you for doing your part to protect yourself and your community. Visit [INSERT LINK] for more information.	