

# Ebola 2026 Informational Bulletin:

*an evolving situation*



## The Situation and Response:

On **May 18, 2026**, the United States Centers for Disease Control and Prevention (CDC) and the Department of Homeland Security (DHS) announced enhanced travel screening, entry restrictions, and public health measures to prevent Ebola disease (specifically related to the Bundibugyo virus that can cause a viral hemorrhagic fever) from entering the United States amid outbreaks in East and Central Africa.<sup>1</sup> [Use this link to read more](#)

The CDC is monitoring, responding and updating the public regarding the current situation via the CDC Ebola Outbreak Current Situation website that includes Reported Cases, Affected Areas, and Information for Preparing for Potential Cases.<sup>2</sup> [Use this link to read more](#)

In addition to the CDC, The World Health Organization is publishing updates via their Disease Outbreak News.<sup>8</sup> [Use this link to read more](#)

## Background:

The Ebola virus (EBOV) was formally known as Ebola Zaire, not to be confused with the term ebolavirus that includes all six species of viruses within the *Ebolavirus* genus.<sup>5</sup> The current situation or interim guidance is focused on viral hemorrhagic fever (VHF) caused by the Bundibugyo virus (BDBV) that is known to cause Ebolavirus disease in humans.<sup>1,12</sup>

The CDC has issued guidance specific to the Public Health Management of People with Suspected or Confirmed VHF or High-Risk Exposures for people located in or intending to travel to the United States. The guidance includes defining Suspected versus Confirmed, High-risk Exposures, Isolation, Quarantine, and Public Health Orders.<sup>3</sup> [Use this link to read more](#)

## Travelers entering the United States from Ebola-Affected Areas:

The CDC is communicating the need for restricted entry, screening & monitoring activities, airport screening locations, high-level screening operations, and other important Questions and Answers. As of the release of this document - Individuals who have been in the Democratic Republic of the Congo (DRC), South Sudan or Uganda within the last 21 days are undergoing enhanced screening at designated United States airports. Travelers who do not have symptoms will be given information on monitoring their health and actions to take if symptoms later appear. These travelers will continue to their final destinations. State and local health departments are responsible for the coordination of ongoing monitoring and support during the 21-day incubation period and responding to specific questions.<sup>1,4</sup> [🔗 Use this link to read more](#)

## Incubation Period and Symptoms

On average, symptoms specific to the Bundibugyo virus begin to appear around 6 days after exposure although the incubation period can range from 2 to 21 days.<sup>5</sup>

Early symptoms of Ebola disease are described as “flu-like.” Early symptoms are often characterized as “dry” symptoms and includes:<sup>5,6,7</sup>

- Elevated body temperature or subjective fever
- Chills
- Fatigue
- Headache
- Aches and pains in muscles and joints
- Sore throat

After 4 or 5 days of illness patients can progress to “wet” symptoms as they become sicker and includes:

- Diarrhea
- Nausea/vomiting
- Bleeding occurs in some cases
- Hiccups
- Eye redness

## National and Regional Support:

The National Special Pathogen System (NSPS) consists of a tiered system of care, made up of health care facilities across the country and is operationalized by the National Emerging Special Pathogens Training and Education Center ([🔗 NTEC](#)). There are 4 levels of care:<sup>11</sup> [🔗 Use this link for NSPS detailed tiered system and regional contact info.](#)

**Level 1 facilities, or Regional Emerging Special Pathogen Treatment Centers (RESPTCs)**, are regional resource hubs which provide highly specialized care. Level 1s care for patients for their duration of illness. There are 13 Regional Emerging Special Pathogen Treatment Centers in the United States.<sup>9</sup>

**Level 2 facilities, or Special Pathogen Treatment Centers (SPTCs)**, have the capacity to deliver specialized care to clusters of patients and serve as primary patient care delivery centers. Level 2 facilities can care for patients for their duration of illness.

**Level 3 facilities, or Assessment Centers**, are widely accessible care delivery facilities, able to conduct limited basic laboratory testing, stabilize patients, and coordinate rapid patient transfer. Level 3s can care for patients for 12-36 hours.

**Level 4 facilities, or All Other Healthcare Facilities**, can identify, isolate, inform, & initiate stabilizing medical care; protect staff; and arrange timely patient transport to minimize impact to normal facility operations.

In 2015, due to the global surge in Ebola virus disease cases, the Administration for Strategic Preparedness and Response (ASPR) established the National Ebola Training and Education Center, the Regional Ebola Treatment Network (RETN), and the Regional Ebola and other Special Pathogen Treatment Centers to provide coordinated care in response to Ebola. State-based Special Pathogen Treatment Centers (SPTCs) and Assessment Centers were also added in 2016 to provide more access to care facilities.<sup>10</sup>

While it is highly unlikely that a person suspected of Ebola would present to a dialysis clinic, it is important for all healthcare providers to be aware of the current situation.

- Be aware of any travel history to places with known outbreaks.
- Any person with a known travel history who has symptoms should not be put on dialysis and be immediately put in an isolation room and/or a separate room.
- Staff should don enhanced precautions PPE and notify their local public health department for further instructions.
- [🔗 Use this link to find contact information for your local health department](#)

<b>Clinical consultations</b>	CDC's Viral Special Pathogens Branch (VSPB) is available 24/7 for clinical consultations, including considerations for VHF diagnostic testing, by calling the CDC Emergency Operations Center at <b>770-488-7100</b> and requesting VSPB's on-call epidemiologist.
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## References:

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- 5 Department of Homeland Security Science and Technology Directorate. Master Question List for Ebolaviruses. US Dept of Homeland Security; January 7, 2025. Accessed June 1, 2026. [https://www.dhs.gov/sites/default/files/2025-03/2025\\_0107\\_st\\_mql\\_for\\_ebolaviruses.pdf](https://www.dhs.gov/sites/default/files/2025-03/2025_0107_st_mql_for_ebolaviruses.pdf)
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- 9 National Emerging Special Pathogens Training and Education Center. Partners & regional contacts. National Emerging Special Pathogens Training and Education Center. Accessed June 1, 2026. <https://netec.org/about-netec/partners-regional-contacts/>
- 10 National Emerging Special Pathogens Training and Education Center. About the NSPS. National Emerging Special Pathogens Training and Education Center. Accessed June 1, 2026. <https://netec.org/nsps/nsps-about-the-nsps/>
- 11 National Emerging Special Pathogens Training and Education Center. National Special Pathogen System (NSPS). National Emerging Special Pathogens Training and Education Center. Accessed June 1, 2026. <https://netec.org/nsps/>
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