

**To:** Vermont Healthcare Providers, Healthcare Facilities, and Clinical Laboratories  
**Date:** May 22, 2026  
**From:** Laura Ann Nicolai, MPH, Deputy State Epidemiologist

## **Ebola Disease (Bundibugyo Virus) Outbreak: Travelers Returning from Affected Areas**

### **Overview**

An outbreak of Ebola disease caused by the Bundibugyo virus (BVD) has been reported in the Democratic Republic of the Congo (DRC), with related cases also identified in Uganda.

No cases have been identified in the U.S. and the risk to the public remains low. However, CDC and the Health Department are raising awareness of this outbreak as a precaution because U.S. passport holders traveling from affected areas may enter the U.S.

**Clinicians should be aware of the signs and symptoms of Ebola disease, as well as the signs and symptoms of other more common travel-associated diseases, like malaria.**

### **Situation Summary**

- On May 17, 2026, the World Health Organization declared a public health emergency of international concern following confirmation of Ebola disease caused by Bundibugyo virus in the DRC and Uganda. South Sudan is also considered to be a possibly affected area because of the porous border with DRC.
- On May 18, CDC implemented enhanced travel screening, entry restrictions, and public health measures to help prevent Ebola disease from entering the United States.
- This is a rapidly evolving situation, and case counts are expected to grow. Visit the [CDC's outbreak situation](#) website for case counts and deaths.
- There is currently no FDA-licensed or authorized vaccine to protect against Bundibugyo virus infection. The Ebola vaccine licensed in the U.S. is indicated for preventing Ebola disease due to a different species of Ebola virus.

### **Requested Actions for Clinicians**

- Review CDC's [recommendations for clinicians](#) assessing patients for Bundibugyo virus infection.
- Compatible symptoms of Bundibugyo virus disease (BVD) include fever, headache, muscle and joint pain, fatigue, loss of appetite, gastrointestinal symptoms, or unexplained bleeding.

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- Ask all patients with compatible symptoms whether they traveled to [affected regions](#) or had contact with someone who traveled to affected regions within the past 21 days.
- Include BVD in the differential diagnosis for patients with travel to affected regions who present with compatible symptoms.
- Consider diagnoses such as malaria, COVID-19, influenza, or other common causes of gastrointestinal and febrile illnesses in patients with recent international travel and evaluate and manage the patient appropriately.
- Review CDC guidance for [management of people with suspected or confirmed viral hemorrhagic fever or high-risk exposures](#).
- Immediately isolate suspected BVD cases: minimize staff interactions, restrict room access, and document exposed personnel.
  - Be prepared to follow CDC's [infection prevention and control recommendations](#).
- Immediately report any febrile patient with travel to the affected areas within the past 21 days to the Health Department at 802-863-7240, option 2 (available 24/7).
- Review facility-level Ebola disease preparedness plans.

#### **Requested Actions for Clinical Laboratories**

- Review CDC's [recommendations for clinical laboratory biosafety](#). Follow CDC's [standard precautions for all patient care](#), which includes Occupational Safety and Health Administration's (OSHA) [Bloodborne Pathogens Standard](#), and the [Biosafety in Microbiology and Biomedical Laboratories Appendix N](#) to reduce the risk of laboratory-acquired illnesses from bloodborne pathogens.
- Be prepared to [perform routine laboratory testing](#) that is critical to evaluating an ill traveler.
- **Notify the Health Department by calling 802-863-7240, option 2 (available 24/7)** and follow [appropriate packing and shipping requirements](#) if specimens need to be shipped to another facility.

#### **Clinical Summary**

- Ebola disease is caused by a group of viruses known as orthoebolaviruses (formerly ebolavirus). Ebola disease most commonly affects humans and nonhuman primates, such as monkeys, chimpanzees, and gorillas. Four orthoebolaviruses cause illness in people, presenting as clinically similar disease. Bundibugyo virus (species *Orthoebolavirus bundibugyoense*) causes Bundibugyo virus disease.

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- The incubation period for BVD ranges from 2 to 21 days after exposure. A person infected with an orthoebolavirus is not considered contagious until after [symptoms](#) appear. Early "dry" symptoms include fever, aches, pains, and fatigue and later "wet" symptoms include diarrhea, vomiting, and unexplained bleeding.
- Ebola disease is spread through **direct contact** (through broken skin or mucous membranes) with the body fluids (e.g., blood, urine, feces, saliva, semen, or other secretions) of a person who is sick with or has died from Ebola disease. Ebola disease can also be transmitted to humans from infected animals, or through contact with objects like needles that are contaminated with the virus. **Ebola disease is not spread through airborne transmission.**
- In the absence of early diagnosis and appropriate supportive care, Ebola disease has a high mortality rate. There is currently no FDA-approved or authorized treatment for BVD, but there are therapies that have shown some efficacy in animal models. With intense supportive care and fluid replacement, mortality rates may be lowered.

### **Additional Resources**

- [Health Advisory \(CDC\), May 19, 2026](#)
- [Travel Health Notices \(CDC\)](#)
- [Statement on Use of Travel Restrictions \(CDC\)](#)
- [Clinical Guidance for Ebola Disease \(CDC\)](#)
- [Clinical Signs of Ebola Disease \(CDC\)](#)
- [Healthcare Provider Trainings on Ebola Disease \(CDC\)](#)
- [Infection Prevention and Control Recommendations for Patients in U.S. Hospitals who are Suspected or Confirmed to have Selected Viral Hemorrhagic Fevers \(VHF\) | Viral Hemorrhagic Fevers \(VHFs\) \(CDC\)](#)
- [Recommendations for Organizations Sending U.S.-based Personnel to Areas with VHF Outbreaks \(CDC\)](#)

If you have any questions, please contact Laura Ann Nicolai at: [lauraann.nicolai@vermont.gov](mailto:lauraann.nicolai@vermont.gov)

To have your information updated please email the  
Vermont HAN Coordinator at: [vthan@vermont.gov](mailto:vthan@vermont.gov).

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**HAN Message Type Definitions**

**Health Alert:** Conveys the highest level of importance; warrants immediate action or attention.

**Health Advisory:** Provides important information for a specific incident or situation; may not require immediate action.

**Health Update:** Provides updated information regarding an incident or situation; unlikely to require immediate action.

**Info Service Message:** Provides general correspondence from the Vermont Department of Health, which is not necessarily considered to be of an emergent nature.

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