



**FEDERAL MINISTRY OF HEALTH AND SOCIAL WELFARE**  
FEDERAL REPUBLIC OF NIGERIA  
**OFFICE OF THE COORDINATING MINISTER OF HEALTH AND SOCIAL WELFARE**

**Ebola Virus Disease (EVD) Emergency Preparedness and  
Response Protocol  
For all Ports and Points of Entry into Nigeria**

*Issued on 26<sup>th</sup> May 2026 by the  
Coordinating Minister of Health and Social Welfare*

## **1. INTRODUCTION**

In view of the ongoing Ebola Virus Disease (EVD) outbreaks in the Democratic Republic of the Congo and Uganda, and the declaration of a Public Health Emergency of International Concern (PHEIC) by the World Health Organisation (WHO), it has become imperative to strengthen Nigeria's border health security architecture. Nigeria's designated Points of Entry (PoEs) remain critical frontline mechanisms for preventing the importation and transmission of infectious diseases through international travel and trade.

This Protocol establishes standardised national procedures for enhanced screening, surveillance, management, preparedness, and response to Ebola Virus Disease at all designated Ports and Points of Entry across the Federal Republic of Nigeria.

## **2. PURPOSE**

This Protocol is issued to:

- Prevent the importation and spread of Ebola Virus Disease into Nigeria;
- Strengthen early detection and prompt management of suspected EVD cases;
- Enhance coordinated public health response mechanisms at all Ports and Points of Entry;
- Standardise screening and surveillance procedures nationwide;
- Ensure compliance with the International Health Regulations (2005); and
- Protect travellers, frontline personnel, and the general public.

## **3. SCOPE**

This Protocol shall apply to all designated international Points of Entry within the Federal Republic of Nigeria, including:

- International Airports;

- Seaports;
- Land Border Crossings;
- General Aviation Terminals; and
- VIP and Private Charter Facilities.

All relevant agencies and operators functioning within these facilities shall ensure full compliance with the provisions herein.

#### **4. LEAD IMPLEMENTING AUTHORITY**

The Federal Ministry of Health and Social Welfare, through the Port Health Services and the Nigeria Centre for Disease Control, shall serve as the lead implementing authority responsible for coordinating, implementing, monitoring, and evaluating this Protocol.

#### **5. COLLABORATING AGENCIES AND STAKEHOLDERS**

Implementation of this Protocol shall be undertaken in collaboration with:

- Federal Airports Authority of Nigeria (FAAN);
- Nigeria Civil Aviation Authority
- Nigeria Immigration Service (NIS);
- Nigeria Customs Service (NCS);
- Nigeria Agricultural Quarantine Service (NAQS);
- Nigeria Centre for Disease Control and Prevention (NCDC);
- State Ministries of Health;
- Airlines and Shipping Companies;
- Security Agencies; and
- Ground Handling Companies.

#### **6. ENTRY SCREENING PROCEDURES**

##### **6.1 Target Travellers**

Enhanced screening measures shall apply to:

- Travellers arriving from affected countries;
- Travellers transiting through affected countries;
- Travellers presenting symptoms suggestive of EVD; and
- Travellers identified through travel history and exposure risk assessments.

##### **6.2 Primary Screening Measures**

All arriving passengers shall undergo the following procedures:

###### **A. Temperature Screening Using:**

- Infrared thermal scanners; and
- Handheld infrared thermometers.

###### **B. Visual Observation**

Screening officers shall observe passengers for:

- Fever;
- Weakness;



- Vomiting;
- Diarrhoea;
- Bleeding tendencies;
- Rash;
- Respiratory distress; and
- Any visibly ill appearance.

### **C. Health Declaration**

All travellers shall complete:

- Digital or Paper Health Declaration Forms prior to arrival in Nigeria; and
- Relevant travel history documentation.

### **D. Travel History Assessment**

Travel history within the preceding twenty-one (21) days shall be assessed for:

- Travel to affected countries;
- Contact with confirmed or suspected EVD cases; and
- Exposure to healthcare facilities or funeral activities in affected areas.

## **7. DIGITAL HEALTH DECLARATION SYSTEM**

A national digital traveller surveillance platform shall be maintained with the capacity for

- Online completion of health declaration forms;
- QR code generation and verification;
- Real-time traveller data retrieval;
- Integration with national surveillance systems; and
- Centralised national database management.

All arriving passengers shall present generated QR codes for verification at designated screening points.

## **8. SECONDARY SCREENING AND ASSESSMENT**

Passengers identified during primary screening shall undergo secondary assessment within designated screening areas.

Secondary screening shall include:

- Detailed symptom assessment;
- Exposure history review;
- Repeat temperature evaluation;
- Clinical risk categorisation; and
- Determination for clearance or referral.

## **9. MANAGEMENT OF SUSPECTED CASES**

### **9.1 Isolation Procedures**

Any traveller meeting the suspect EVD case definition shall:

- Be isolated immediately;
- Receive appropriate PPE-guided management; and



- Be restricted from unauthorised movement.

## **9.2 Notification and Reporting**

The following authorities shall be notified immediately:

- State Epidemiologist;
- Nigeria Centre for Disease Control and Prevention (NCDC);
- National Port Health Services Headquarters; and
- Designated referral health facility.

## **9.3 Evacuation Procedures**

Suspected cases shall be evacuated using:

- Dedicated infectious disease ambulances;
- Trained personnel utilising full Personal Protective Equipment (PPE); and
- Approved referral pathways.

## **10. INFECTION PREVENTION AND CONTROL**

All frontline personnel shall:

- Utilise appropriate Personal Protective Equipment (PPE);
- Practice proper hand hygiene before and after passenger interactions;
- Undergo regular Infection Prevention and Control (IPC) refresher training; and
- Adhere strictly to environmental decontamination procedures.
- Hand-sanitising facilities shall be installed and maintained throughout all designated Points of Entry.

## **11. HOLDING AND ISOLATION FACILITIES**

Each designated Point of Entry shall maintain:

- Functional holding and isolation areas;
- Adequate ventilation systems;
- Hand hygiene facilities;
- Adequate PPE stockpiles; and
- Biohazard waste disposal systems.

## **12. HUMAN RESOURCE REQUIREMENTS**

The following personnel shall be deployed as minimum operational requirements:

- Screening Officers;
- Surveillance Officers;
- Data Management Officers;
- Environmental Health Officers;
- Ambulance Personnel; and
- Surge Response Staff.
- Twenty-four-hour rotational staffing arrangements shall be maintained at all designated Points of Entry.



### **13. EQUIPMENT REQUIREMENTS**

Each designated Point of Entry shall maintain, at a minimum:

- Thermal scanners;
- Handheld infrared thermometers;
- Adequate PPE stockpiles;
- Computers and laptops for real-time data entry;
- QR code scanners;
- Communication equipment, including base radios; and
- Dedicated infectious disease ambulances.

### **14. RISK COMMUNICATION**

Port Health Services and the Nigeria Centre for Disease Control shall:

- Disseminate EVD awareness and preventive information;
- Broadcast public health advisory messages;
- Display educational materials prominently within Points of Entry; and
- Provide multilingual risk communication materials where necessary.

### **15. TRAINING AND SIMULATION EXERCISES**

Regular preparedness activities shall include:

- Tabletop simulation exercises;
- Full-scale drills;
- Refresher training programmes;
- PPE donning and doffing exercises; and
- Passenger management simulations.

### **16. DATA MANAGEMENT AND REPORTING**

All designated Points of Entry shall:

- Maintain daily screening records;
- Submit daily situation reports;
- Maintain centralised digital surveillance databases; and
- Ensure secure storage and retrieval of surveillance information.

### **17. MONITORING AND EVALUATION**

The Port Health Services Headquarters shall conduct:

- Routine compliance assessments;
- Supervisory visits;
- Surveillance audits; and
- Performance evaluations to ensure effective implementation of this Protocol.



## **18. LEGAL AUTHORITY**

This Protocol derives its authority from:

- The International Health Regulations (2005);
- The Quarantine Act of the Federal Republic of Nigeria; and
- Relevant National Public Health Laws and Policies.

Any breach of the provisions contained herein by any individual, operator, or institution shall attract appropriate sanctions and penalties in accordance with extant laws and regulations.

## **19. CONCLUSION**

The ongoing Ebola Virus Disease outbreaks in affected countries necessitate strengthened national preparedness and enhanced surveillance measures at Nigeria's Ports and Points of Entry. The implementation of this Protocol shall strengthen Nigeria's capacity for early detection, rapid response, and prevention of cross-border transmission of Ebola Virus Disease, while ensuring compliance with international public health and health security obligations.

## **APPROVAL**

This Protocol is hereby issued for immediate implementation at all designated Ports and Points of Entry within the Federal Republic of Nigeria.



**Muhammad Ali Pate, CON**

Coordinating Minister of Health and Social Welfare

