

# VIRAL HAEMORRHAGIC FEVERS RISK ASSESSMENT (Version 3: 11.08.2014)

**A)** Does the patient have a fever [ $>38^{\circ}\text{C}$ ] or history of fever in past 24 hours **AND** has returned from (or is currently residing in) a VHF endemic country (<http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/ViralHaemorrhagicFever/VHFMaps/>) within 21 days?  
**OR**  
**B)** Does the patient have a fever [ $>38^{\circ}\text{C}$ ] or history of fever in past 24 hours **AND** has cared for / come into contact with body fluids of / handled clinical specimens (blood, urine, faeces, tissues, laboratory cultures) from an individual or laboratory animal known or strongly suspected to have VHF?

**NO to A AND B**

VHF Unlikely;  
manage locally

**YES to A only**

**YES to B**

### ADDITIONAL QUESTIONS:

- Has the patient travelled to any area where there is a current VHF outbreak? (<http://www.promedmail.org/>)
- Has the patient lived or worked in basic rural conditions in an area where Lassa Fever is endemic? (<http://www.hpa.org.uk/webw/HPAweb&Page&HPAwebAutoListName/Page/1191942150101>)
- Has the patient visited caves OR mines, or had contact with primates, antelopes or bats in a Marburg / Ebola endemic area? ([http://www.hpa.org.uk/webw/HPAweb&HPAwebStandard/HPAweb\\_C/1254510365073](http://www.hpa.org.uk/webw/HPAweb&HPAwebStandard/HPAweb_C/1254510365073))
- Has the patient travelled in an area where Crimean-Congo Haemorrhagic Fever is endemic ([http://www.hpa.org.uk/webw/HPAweb&HPAwebStandard/HPAweb\\_C/1195733776241](http://www.hpa.org.uk/webw/HPAweb&HPAwebStandard/HPAweb_C/1195733776241)) **AND** sustained a tick bite\* or crushed a tick with their bare hands OR had close involvement with animal slaughter?

No to ALL additional questions

**YES to ANY ADDITIONAL QUESTION**

**CLINICAL QUESTION TO DETERMINE INFECTION CONTROL BEHAVIOUR AND PROTECT STAFF:** does the patient have extensive bruising or active bleeding?

**NO**

**YES**

**HIGH POSSIBILITY OF VHF**

- ISOLATE PATIENT IN A SIDE ROOM
- Urgent Malaria investigation
- Full blood count, U&Es, LFTs, Clotting screen, CRP, glucose, blood cultures
- Inform laboratory of possible VHF case (for specimen waste disposal purposes if confirmed)

**LOW POSSIBILITY OF VHF**

- Urgent Malaria investigation
- Urgent local investigations as normally appropriate, including blood cultures

**Malaria Positive:**  
Manage as Malaria;  
VHF unlikely

- Discuss with Infection Consultant (Infectious Disease/Microbiology/Virology)
- Infection Consultant to arrange VHF screen with Imported Fever Service (0844 7788990)
- Notify Local Health Protection Unit
- Consider empiric antimicrobials

**Malaria Negative**

Continuing fever after 72 hours?

**Malaria Negative**

Alternative diagnosis confirmed?

**Yes**

VHF Unlikely;  
manage locally

**No**

Clinical concern OR continuing fever after 72 hours?

**No**

Discuss with Infection Consultant (Infectious Disease/Microbiology/Virology)  
Possibility of VHF; Infection Consultant to consider discussion of VHF screen with Imported Fever Service (0844 7788990)

**Yes**

**Yes**

- Inform/update Local Health Protection Unit
- Ensure patient contact details recorded
- Patient self isolation
- Follow up VHF screen result
- Review daily

**CLINICAL QUESTION TO DETERMINE INFECTION CONTROL BEHAVIOUR AND PROTECT STAFF:** does the patient have extensive bruising OR active bleeding OR uncontrolled diarrhoea OR uncontrolled vomiting?

**No**

**No**

**Admit**

**Yes**

**VHF Result**

**Positive**

**Negative**

Manage locally

**CONFIRMED VHF**

- Contact High Level Isolation Unit for transfer (020 7794 0500: Royal Free)
- Launch full public health actions, including categorisation and management of contacts
- Inform lab if other lab tests are needed

\* If an obvious alternative diagnosis has been made e.g. tick typhus, then manage locally

**INFECTON CONTROL MEASURES**

**MINIMAL RISK**  
Standard precautions apply:  
Hand hygiene, gloves, plastic apron  
(Eye protection and fluid repellent surgical facemask and for splash inducing procedures)

**STAFF AT RISK**  
Hand hygiene, gloves, plastic apron, fluid repellent surgical facemask, eye protection (FFP3 respirator for aerosol generating procedures )  
**Patients that have extensive bruising, active bleeding, uncontrolled diarrhoea, uncontrolled vomiting:**  
Hand hygiene, double gloves, fluid repellent disposable gown/suit, eye protection, FFP3 respirator

**STAFF AT HIGH RISK**  
Hand hygiene, double gloves, fluid repellent disposable gown or suit, plastic apron (over disposable gown/suit) eye protection, FFP3 respirator