



VHF QUICK REFERENCE GUIDE FOR HEALTHCARE WORKER -

HOSPITALS & TREATMENT CENTRES

BEFORE AN OUTBREAK

CASE MANAGEMENT

- Know national treatment protocol for all Viral Haemorrhagic Fevers (VHFs) (drug choice, dosage and administration e.g. Ribavirin for Lassa tever)
- Ensure a triage system for early detection and management of potentially infectious patients at initial points of entry to the facility

INFFCTION **PREVENTION** AND CONTROL (IPC)

- Undergo Infection Prevention and Control (IPC) training
- Adhere to standard precautions for IPC and appropriate use of Personal Protective Equipment(PPE)
- Know the use of IPC measures in isolation facilities and the precautions for VHF (hand hygiene best practices plus droplet and contact precautions, as well as proper use and application of PPE)
- Know principles of both healthcare Worker safety and patient safety

SURVEILLANCE

- Know standard case definition of Lassa Fever and other VHFs, highlighting the Probable Case status
- Enhance active surveillance including immediate reporting of suspected VHFs to the Local Government Area (LGA) Disease Surveillance and Notification Officer (DSNO)
- Report all probable VHF cases or unexplained deaths accompanied by bleeding, to the LGA DSNO

DURING AN OUTBREAK

CASE MANAGEMENT

- Know that any suspected VHF case should be admitted immediately into an isolation room/ward, in a hospital designated by the State to treat VHF cases
- For Lassa fever
 - o Ribavirin is the drug of choice for the treatment of Lassa fever and should be initiated early within the first week of onset of illness
 - o Treatment with Ribavirin may be commenced after collection of blood samples if there was established contact with a Lassa fever case OR if the clinical symptoms show it is a classic case of Lassa fever, before confirmatory results are received
- Dedicate non-disposable equipment for patient use only (i.e. stethoscopes, BP cuff, glucometer)
- Adopt single-use equipment/instruments/care devices, where possible
- Know importance of infection prevention measures to contain respiratory secretions to prevent the spread of respiratory pathogens











DURING AN OUTBREAK

INFECTION PREVENTION AND CONTROL (IPC)

- Comply and adhere strictly to IPC policy, guidelines and Standard Operating Procedures as they relate to the services provided
- Ensure safe burial practices under the supervision of a trained burial team
 - The corpse of a VHF case should be wrapped in a sealed, leakproof material (body bag), not embalmed but cremated or buried promptly in an air-tight coffin (sealed casket) or appropriate body bag
 - Body washing must not be done as the risk of infection of the attendants is very high.
- All non-disposable equipment must be thoroughly cleaned and reprocessed daily according to manufacturer's instructions
- Ensure all healthcare workers have access to, and wear appropriate PPE when handling and reprocessing contaminated medical devices
- Post mortem examination should be limited ONLY to essential evaluations e.g. to arrive at a diagnosis in a probable case and should be considered after the benefits and risks have been carefully assessed. Only TRAINED personnel should perform a post mortem examination under the guidance of recommended infection prevention and control procedures.

SURVEILLANCE

- Develop a triage system for early detection and management of potentially infectious patients at initial points of entry to the facility
- Ensure prompt placement of suspected cases in a holding area and a systematic approach to transfer when appropriate.
- Immediate notification of a suspected VHF case to the LGA DSNO and State Epidemiologist.
- Conduct active case search
- Ensure community sensitization within the facility and surrounding community

AFTER AN OUTBREAK

CASE MANAGEMENT

 Follow up on survivors and close monitoring for post-infection consequences of VHF e.g. Counsel patients on safe sexual practices as the virus can be isolated in semen etc.

INFECTION PREVENTION AND CONTROL (IPC)

 Adhere to standard precautions for infection prevention and control and appropriate use of PPE

SURVEILLANCE

 Enhance active surveillance including immediate reporting of suspected VHFs to LGA DSNO and State Epidemiologist





