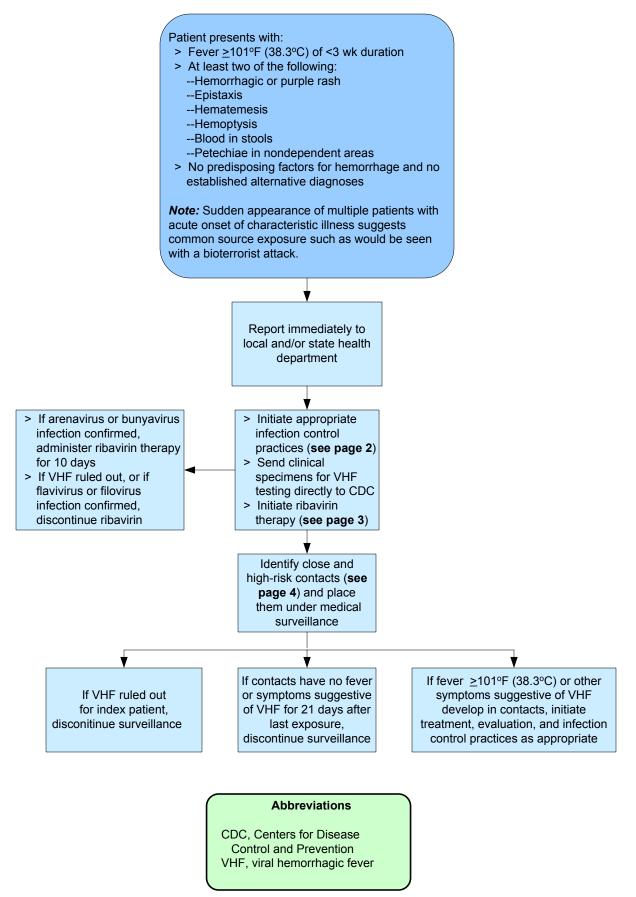
Clinical Pathway: Viral Hemorrhagic Fever



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Type of Precaution	Procedures
Airborne Precautions	Place the patient in a private room with:
	Negative air pressure
	6 to 12 air changes per hour
	Restricted access of nonessential staff and visitors
VHF-specific personal protective equipment*	Provide the following PPE for healthcare providers:
	N-95 respirator or powered air-purifying respirator
	Double gloves
	Impermeable gowns
	Face shields
	Goggles for eye protection
	Leg and shoe coverings
Hand hygiene	All healthcare providers should adhere to the following practices:
	Clean hands prior to donning PPE for patient contact
	• After patient care, remove gloves, gown, and leg and shoe coverings, and immediately clean hands
	• Clean hands prior to the removal of facial protective equipment to minimize exposure of mucous membranes with potentially contaminated hands
	 Clean hands again after all PPE is removed
Handling of medical equipment	Dedicate medical equipment such as:
	Stethoscopes
	Blood pressure cuffs
	Glucose monitors
	Point-of-care analyzers (if available)
Environmental decontamination	 Environmental surfaces, inanimate contaminated objects, or contaminated equipment should be disinfected with an EPA-registered hospital disinfectan or a 1:100 dilution of household bleach using standard procedures
	• Contaminated linens should be incinerated, autoclaved, or placed in double (ie, leak-proof bags) bags at the site of use and washed without sorting in a normal hot water cycle with bleach
	Hospital housekeeping staff and linen handlers should wear appropriate PPE when handling or cleaning potential contaminated material or surfaces
Patient cohorting	If multiple patients with suspected VHF are admitted to one healthcare facility:
	Cohort them in the same part of the hospital to minimize exposure to other patients and healthcare workers
	 Dedicate staff trained in appropriate infection control practices to care for them
	If large number of patients must be cared for in 1 facility, then
	recommendations to place all patients under Airborne Precautions (see above) may need to be modified

*The most common forms of exposure involve accidental parenteral inoculation; therefore, particular attention should be paid to handling of needles and sharp instruments.