

Appendix 1 – Infection prevention and control recommendations in brief

VHF Quick Reference Guide

This quick reference guide is intended to provide the key elements for infection prevention and control in relation to viral haemorrhagic fevers (VHF). For detailed guidance and further advice please refer to the [Queensland Health guideline for infection prevention and control for the management of viral haemorrhagic fevers](#)

VHF Quick Reference Guide

Issue	Recommendation/advice
Mode of transmission	<p>Direct contact with blood or body fluids of people infected with VHF.</p> <p>Direct contact with objects and environmental surfaces contaminated with the blood or body fluids of people with VHF.</p> <p>There is no evidence of human-to-human transmission of VHF via droplet or aerosol, however, aerosol-generating procedures and/or behaviours may present a risk to healthcare workers (HCW) due to environmental viral load.</p>
Patient placement Refer Appendix 3 of guideline	<p>Single room with unshared ensuite, negative pressure and dedicated anteroom preferred. Door to remain closed.</p> <p>Use signage on door of room to advise non-essential staff not to enter and denote transmission-based precautions required.</p> <p>Adequate space must be allocated outside the room for safe PPE donning and doffing. An additional area may be required for staff to change into/out of surgical scrubs, and to shower in case of body fluid exposure.</p>
Personal protective equipment (PPE) Refer Appendix 7 of guideline	<p>Two tiers of PPE:</p> <p>Tier 1 – For patients under investigation, with DRY symptoms ONLY (fever, aches, pains, sore throat, loss of appetite, fatigue)</p> <ul style="list-style-type: none"> Gown/coverall, two pairs gloves, particulate filter respirator (P2/N95), face shield. <p>Tier 2 – For patients with confirmed VHF, and patients under investigation with WET symptoms (vomiting, diarrhoea, bleeding)</p> <ul style="list-style-type: none"> As for Tier 1, PLUS: boot covers to mid-calf, hood covering hair, ears and neck. <p>ALL staff entering patient room MUST be trained in donning and doffing, and have donning and doffing supervised by a trained observer at all times.</p> <p>Doffing PPE is high risk for self-contamination. Doffing MUST be guided and supervised and done slowly and carefully. Hand hygiene must be performed between each step of doffing. Donning and doffing checklists are included in Appendix 7 of VHF guideline.</p>
Hand hygiene Refer Appendix 5 of guideline	<p>While in the patient room, hand hygiene must be performed between different patient care tasks. This is to be performed using alcohol-based hand rub (ABHR) on the outer gloves. Do not routinely remove gloves to clean hands inside the patient room (this is different from the advice for all other patients).</p> <p>If the outer gloves become visibly soiled, under the direction of the trained observer, HCW is to inspect integrity of gloves, wipe outer gloves using disinfectant wipes, doff outer gloves, use ABHR on inner gloves, and replace outer gloves before continuing patient care activities. If the inner gloves are impacted this is a PPE breach and the HCW must be removed from the patient care area.</p>

Issue	Recommendation/advice
Notification and Expert Advisory Group	<p>Notify the suspected VHF case, as soon as possible: local infection prevention and control team and local public health unit.</p> <p>If patient transfer or retrieval from one hospital to another is considered, an Expert Advisory Group should be convened as per Appendix 11 of VHF guideline.</p>
Diagnostic testing	<p>Notify laboratory and local public health unit in advance of any planned testing.</p> <p>Limit use of phlebotomy, injection and laboratory procedures to the minimum necessary for essential diagnostic testing and patient care. Use point of care testing when available. Handle sharps with extreme care and dispose at point of use.</p> <p>VHF diagnostic testing requires:</p> <ul style="list-style-type: none"> • 3 x EDTA blood (mauve top tube). • 1 x serum tube. • 1 x urine sample or throat swab (dry or flocced). <p>Label tubes prior to collection and make every effort not to contaminate outside of specimen containers.</p> <p>Do not use pneumatic tube system to transport specimens. For road or air transport of specimens use IATA compliant Category A packaging (urgently requested from local PQ laboratory) and indelibly mark the package “DO NOT OPEN IN CSR”.</p> <p>Clearly label the container and pathology request form as “Suspected Viral Haemorrhagic Fever” prior to sending.</p> <p>Refer to Viral haemorrhagic fever (VHF) testing Pathology Queensland (health.qld.gov.au)</p>
Environmental cleaning Refer Appendix 8 of guideline	<p>General cleaning is to be conducted with listed disinfectants in the Australian Register for Therapeutic Goods (ARTG) or a chlorine-based product containing sodium hypochlorite.</p> <p>Environmental cleaning and disinfection will be undertaken using either:</p> <ul style="list-style-type: none"> • a 2-step clean, which involves a physical clean using detergent solution followed by use of a chemical disinfectant. • a 2-in-1 clean in which a combined detergent/disinfectant wipe or solution is used, and mechanical/manual cleaning action is involved. <p>Spills management using spill kit requires a 5000-ppm sodium hypochlorite solution.</p>
Patient care equipment	<p>All equipment must be dedicated for the exclusive use on the patient.</p> <p>Single-use disposable equipment is preferred.</p> <p>Thorough decontamination is required of any equipment leaving the room.</p>
Staff considerations	<p>A log of all staff having contact with the patient must be maintained.</p> <p>Contact with a patient with VHF must be limited to essential personnel only.</p> <p>Staff must be familiar with the signs and symptoms of VHF. They must monitor their health, including monitoring and recording their temperature twice daily, commencing 48 hours after initiating care period and concluding 21 days after their last VHF patient contact. Staff must isolate themselves and notify their employer and public health unit immediately if they develop signs or symptoms of VHF.</p>