



VHF QUICK REFERENCE GUIDE FOR IGA RAPID RESPONSE TEAMS

BEFORE AN OUTBREAK

CASE MANAGEMENT

- Know the designated Isolation/treatment facilities within your LGA or State and keep contact details of focal person.
- Ensure that all facilities have holding areas for suspected cases of Viral Haemorrhagic Fevers (VHFs)
- Ensure case definitions are visibly pasted in all health facilities within your LGA.

INFECTION PREVENTION AND CONTROL (IPC)

- Undergo Infection, Prevention and Control (IPC) training including evacuation and safe burial procedures.
- Plan and implement a step-down training/sensitization on IPC measures in communities and at health facilities within your LGA.

SURVEILLANCE

- Know standard case definition of Lassa Fever and other VHFs, highlighting the Probable Case status.
- Identify relevant CBOs, religious bodies etc. within your LGA and obtain and maintain contact details for possible collaboration.
- Enhance active surveillance including immediate reporting of suspected VHFs to State Epidemiologist.
- Identify community informants and train them on active surveillance and reporting.

DURING AN OUTBREAK

CASE MANAGEMENT

• Know that any suspected VHF case should be isolated immediately from the commwre the development of 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)

- Comply and adhere strictly to IPC policy, guidelines and Standard Operating Procedures (SOPs) when dealing with suspected cases or high risk contacts.
- Adhere to standard precautions for infection prevention and control and appropriate use of PPE when evacuating sick or dead bodies

SURVEILLANCE

Inform the State Epidemiologist of any suspected VHF case.

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AFTER AN OUTBREAK	
CASE MANAGEMENT	 Review plans and field experience and recommend best practices to the State Support and ensure the continuation of a triage system for early detection and management of potentially infectious patients at initial points of entry to the facility.
INFECTION PREVENTION AND CONTROL (IPC)	 Review plans and field experience and recommend best practices to State Comply and adhere strictly to IPC policy, guidelines and SOPs when dealing with suspected cases or high risk contacts.
SURVEILLANCE	 Review plans and field experience and recommend best practices to State. Continue with active surveillance at the LGA for two complete incubation periods after the last contact with a confirmed case.