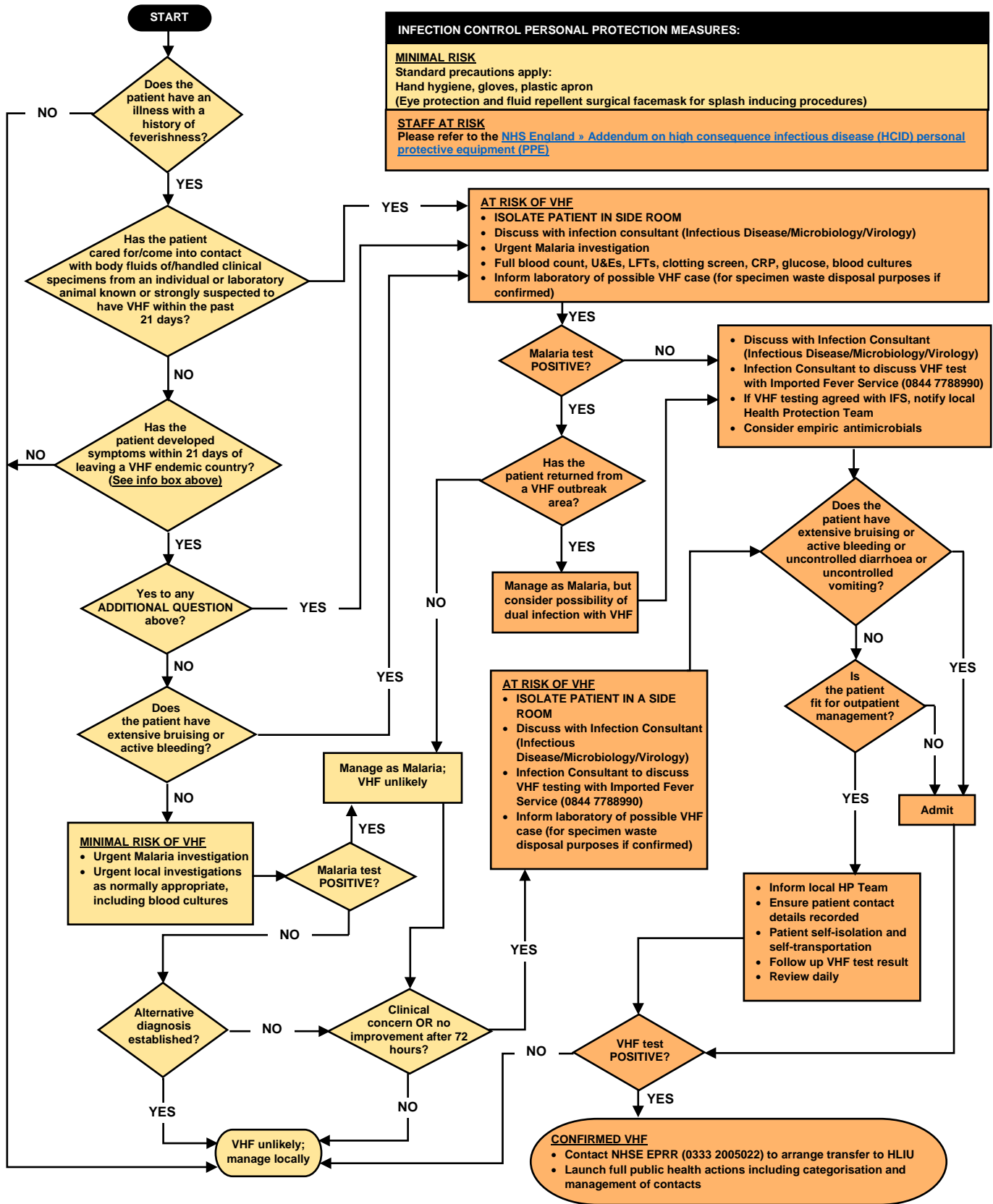


VIRAL HAEMORRHAGIC FEVERS RISK ASSESSMENT (October 2024)

VHF ENDEMIC COUNTRIES:
Information on VHF endemic countries can be found at High consequence infectious disease: country specific risk - GOV.UK (www.gov.uk)
ADDITIONAL QUESTIONS:
<ul style="list-style-type: none"> Has the patient travelled to any area where there is a current VHF outbreak? (WHO Disease Outbreak News / High Consequence Infectious Diseases: Monthly Summaries) OR Has the patient lived or worked in basic rural conditions in an area where human cases of Lassa fever occur? OR Has the patient visited caves/mines, or had contact with primates, antelopes or bats (or eaten their raw/undercooked meat) in a Marburg/Ebola endemic area? OR Has the patient travelled in an area where Crimean-Congo Haemorrhagic Fever is endemic AND sustained a tick bite* or crushed a tick with their bare hands OR had close involvement with animal slaughter? (*If an obvious alternative diagnosis has been made e.g. tick typhus, then manage locally)



Note: For cases not meeting the algorithm criteria but where the suspicion of a VHF remains based on clinical and / or exposure history, please contact the IFS to discuss
Please note this algorithm is a guide designed to aid early diagnosis of VHF cases and should be used in conjunction with ACDP guidance: [Viral haemorrhagic fever: ACDP algorithm and guidance on management of patients - GOV.UK \(www.gov.uk\)](#)