



Health Care Facility Viral Hemorrhagic Fever (VHF) Preparedness Checklist

IMPORTANT NOTE: This PDF is for reference only. Please complete the VHF Checklist via the online form [here](#).

Viral Hemorrhagic Fevers (VHF) are a group of high consequence infectious diseases caused by several families of viruses. The term VHF refers to an illness that can affect multiple organ systems and can be accompanied by fever, headache, vomiting, abdominal pain, diarrhea, and hemorrhage. VHFs addressed in this document include **Crimean-Congo Hemorrhagic Fever (CCHF)**, **Ebola Virus Disease (EVD)**, **Lassa Fever**, and **Marburg Virus Disease (MVD)**.

Health care facility preparedness to care for patients with a viral hemorrhagic fever (VHF) is essential to prevent transmission to staff, other patients and our communities. In July 2024, the Joint Commission updated the infection control chapter to include standard IC 07.01.01 which addresses an organization process to manage high consequence infectious diseases. To assist healthcare facilities, assess and advance their VHF preparedness, the National Emerging Special Pathogens Training and Education Center (NETEC) developed the Health Care Facility Viral Hemorrhagic Fever Preparedness Checklist as a VHF planning tool. This tool will help health care facilities assess their readiness to identify, isolate, inform, and provide initial treatment for patients suspected or confirmed to have a VHF.

This checklist is intended to guide facilities through a review of their immediate care capabilities and provide resources to assist in the resolution of preparedness gaps it reveals. If any gaps in preparedness are identified through the completion of this checklist NETEC is available to provide targeted support services to offer expert advice. Please contact us via email using info@netec.org or ask our experts a question using our online form [Ask Our Experts | NETEC](#).

For a more in-depth assessment of your special pathogen program, we recommend you complete the NETEC Special Pathogen Operational Readiness Self-Assessment ([SPORSA](#)). Visit [Ask Our Experts | NETEC](#) for more information.

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IDENTIFY

The first step in the VHF response framework for health care facilities is to quickly recognize and safely manage patients with a suspected or confirmed VHF to reduce transmission risk. Screening all patients upon entry to a facility for signs, symptoms, and epidemiological risk factors for VHF will facilitate early identification of a patient at risk for having the disease.

Identify Readiness Items			
#	Item	Status Yes or No	Notes
1.	There is an established process to complete periodic review of countries where VHF are endemic or are currently experiencing VHF outbreaks.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.	Screening for symptoms and travel history occurs at all points of patient entry to the facility including those arriving by EMS.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.	Signage is present at all points of entry into the health system to enable patients to self-identify if their symptoms are consistent with a VHF and what the next steps are (e.g., mask and notify staff).	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.	Staff who will complete patient screening have received training on the VHF "Identify" process.	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Identify Resources/Guidance

NETEC Town Hall: Preparing Frontline Health Care Workers for Ebola:

https://youtu.be/Okh_Sa9cVa4

Identify, Isolate, and Inform Tip Sheet:

[Identify, Isolate, Inform Tip Sheet · NETEC Resource Library \(netecweb.org\)](https://netecweb.org/resource/identify-isolate-inform-tip-sheet)

Identify Worksheet:

<https://repository.netecweb.org/files/original/c1c81476c9626fd1d8f8be5fa75f9ad3.pdf>

Global Outbreak Resources:

<https://www.cdc.gov/outbreaks/index.html>

<https://dph.georgia.gov/TravelClinicalAssistant>

Screening Algorithm Example:

[https://repository.netecweb.org/items/show/458 \[repository.netecweb.org\]](https://repository.netecweb.org/items/show/458 [repository.netecweb.org])

Identify Isolate Inform Webinar/ Course:

<https://youtu.be/QkGflp7W7Cc>

<https://courses.netec.org/courses/identify-isolate-inform>

Mystery Patient Drill Kit:

<https://repository.netecweb.org/pdfs/specialpathogenmysterydrill.zip>

VHF SBARs and FAQs:

Marburg SBAR:

<https://repository.netecweb.org/exhibits/show/marburg/item/1891>

Marburg FAQ:

<https://repository.netecweb.org/exhibits/show/marburg/item/1890>

Crimean Congo Hemorrhagic Fever and Nipah Virus FAQ and SBARs:

<https://netec.org/2024/06/28/new-faqs-and-sbars-for-ebola-virus-disease-crimean-congo-hemorrhagic-fever-and-nipah-virus/>

ISOLATE

The second step of the VHF response framework for health care facilities is to safely isolate and manage patients with a suspected or confirmed VHF to reduce transmission risk. Rapid isolation allows infection prevention and control measures to be implemented to reduce exposure to staff, visitors, and other patients.

Isolate Readiness Items			
#	Item	Status Yes or No	Notes
1.	Masks are available at all points of entry for patients entering the facility to quickly apply if indicated.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.	An isolation space has been identified and:	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2a.	Staff are oriented to its location, use, and limitations.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2b.	The process for using the space has been developed and assessed (e.g., moving out other patients or extra equipment, initiating and validating negative pressure).	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2c.	A written checklist has been developed to direct the preparation of the isolation space(s) and staff know where and how to access it.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2d.	There is a private restroom or bedside commode available for the patient to use in accordance with facility and jurisdictional regulations for human waste management.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2e.	The isolation space is an airborne infection isolation room (AIIR) or can accommodate a portable negative pressure unit if needed and available. **	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2f.	There is a process for communication to occur into and out of the room, while maintaining isolation precautions (e.g., white boards, speaker phones, call light system).	Yes <input type="checkbox"/> No <input type="checkbox"/>	

2g.	There is a process to limit the number of personnel that enter the isolation space to essential personnel.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2h.	There is a process to clearly identify, document, and follow up with all personnel that enter the isolation space.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.	There is a written plan for the internal transfer of a patient from the point of entry into the facility to the designated isolation space. The written plan includes the following:	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3a.	Ability to control the internal route to the isolation space, minimizing risk of exposure to others.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3b.	Preparing the isolation space for the patient arrival including isolation signage, removing extra supplies and equipment, and delineation of zones.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3c.	Guidance on safely managing the patient until the isolation space is ready for admission (e.g., masking and maintaining 6ft distance from other patients, visitors, and staff)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3d.	Personnel who will implement the plan have received training.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.	Staff who will work in the isolation area have been trained in special pathogen infection control workflows and processes.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<p><i>*Refer to the Isolation Worksheet in Resources for more detailed guidance</i></p> <p><i>**If there are no AIIR and portable negative pressure devices are not available, identify a private, closed-door room with a bathroom or commode that the patient can be placed in while remaining masked.</i></p>			

Isolation Resources/Guidance

Isolation Worksheet:

<https://repository.netecweb.org/files/original/77003e56292b75db4d90bccdea9120ca.pdf>

CDC Guidance on Hospital Room Infection Control for Ebola Virus:

<https://www.cdc.gov/vhf/ebola/clinicians/cleaning/hospitals.html>

Containment Wrap Protocol:

<https://repository.netecweb.org/files/original/b68363bffb7eec4a6189ada3a480317f.pdf>

Log Sheet:

<https://repository.netecweb.org/files/original/78157aefeb472e0d99e0300509f72a1a.pdf>

INFORM

The third step of the VHF response framework for health care facilities is to promptly notify key partners to reduce transmission risk. Timely and efficient communication processes are essential to be able to alert internal and external stakeholders of the identification of a patient suspected to have a VHF. External stakeholders, such as a Department of Public Health, may also be needed to determine if a patient meets VHF suspect case criteria.

Inform Readiness Items			
#	Item	Status Yes or No	Notes
1.	Key personnel internal (e.g., Infection preventionists, health care administrator, etc.) to your facility who will provide support and/or be involved in the care of a suspect case have been identified.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.	Key partners both internal and external to your facility, such as county and state public health partners and Laboratory Response Network (LRN) partners, have been identified and staff know who to inform.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.	Contact information for internal and external key personnel is readily accessible.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.	Staff who will inform key personnel are knowledgeable on the process, including what information to provide.	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Inform Resources/Guidance

Inform Worksheet:

<https://repository.netecweb.org/files/original/a537618495fdb8be570540cb604ca035.pdf>

CDC Health Alert Network:

<https://emergency.cdc.gov/han/>

Health Department Directories:

<https://www.cdc.gov/publichealthgateway/healthdirectories/index.html>

PERSONAL PROTECTIVE EQUIPMENT (PPE)

PPE ensembles worn during the care of patients suspected or confirmed to have a VHF must provide enhanced contact and droplet protection and should consider both the condition of the patient and the risk of exposure to blood and other potentially infectious materials posed by care tasks. Confirmed cases or suspect cases considered to be “wet” may require additional precaution measures including airborne isolation. Complex and infrequently used PPE ensembles require additional training to ensure staff safety and may require additional personnel to assist in doffing. The use of a trained observer is recommended to ensure correct donning and safe doffing practices to reduce self-contamination.

PPE Readiness Items			
#	Item	Status Yes or No	Notes
1.	The PPE ensemble has been selected based on pathogen transmission and patient condition and includes consideration to elevate based on presumptive positive test results.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.	Staff have received training on VHF PPE donning and doffing protocols.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.	There is a clean space to don PPE and a separate safe space to doff PPE.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.	There are PPE donning and doffing checklists to guide staff utilizing PPE ensembles.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
5.	There is an adequate amount of appropriate PPE available to provide care for at least 1 patient for 24-48 hours. See DASH tool HERE for guidance on determining facility PPE supply needs.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
6.	A trained observer is utilized to monitor activities in the isolation room and during donning and doffing of PPE.	Yes <input type="checkbox"/> No <input type="checkbox"/>	

PPE Resources/Guidance

ASPR/TRACIE Disaster Available Supplies in Hospitals (DASH) tool:

<https://dashtool.org>

CDC PPE Guidance for Ebola Virus Care:

<https://www.cdc.gov/vhf/ebola/healthcare-us/ppe/guidance.html>

Know Your PPE:

<https://repository.netecweb.org/items/show/1053>

Space Recommendations for Donning and Doffing Personal Protective Equipment (PPE) in Biocontainment Areas:

<https://repository.netecweb.org/items/show/1708>

Viral Hemorrhagic Fevers PPE Matrix:

<https://repository.netecweb.org/files/original/8c1dda9b0654d3013ddc57a29b960ab2.pdf>

TREATMENT & CARE

The goal of caring for patients suspected or confirmed to have a VHF is to provide safe, effective, high-quality patient care while maintaining the safety of all personnel.

Treatment and Care Readiness Items			
#	Item	Status Yes or No	Notes
1.	If a patient suspected to have a VHF arrives at your facility, personnel are familiar with internal processes and have access to resources for just-in-time-training.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.	The care interventions that can be safely provided for patients suspected or confirmed to have VHF have been discussed and clinicians are aware of how to safely offer care including expansion of duties to reduce the number of staff (clinical and non-clinical) in the patient's room (e.g., diagnostic imaging, invasive procedures, specimen collection).	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.	There is a written plan to collaborate with employee health and/or public health to monitor personnel involved in the care of a patient with a confirmed diagnosis (including laboratory personnel who may have handled biospecimens or EVS who may have managed environmental cleaning and disinfection).	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.	Diagnostic testing for presumptive and confirmatory pathogen identification will be conducted in coordination with the public health department.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
5.	If routine clinical laboratory testing is required, either dedicated point of care devices will be used, or a risk assessment of the main clinical laboratory completed to determine what tests can be safely performed.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
6.	The facility has access to resources for guidance on packaging and shipment of presumed category A specimens.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
7.	The facility is aware of and has identified available resources for decedent management and will seek support from their RESPCT or public health department to conduct the process if needed.	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Treatment and Care Resources/Guidance

Treatment and Care Worksheet:

<https://repository.netecweb.org/files/original/71028eadfb30cd38c0ba31e01a5fa28a.pdf>

JIT Training Resources:

<https://repository.netecweb.org/exhibits/show/netec-education/justintime>

Laboratory Testing for Crimean-Congo Hemorrhagic Fever:

<https://repository.netecweb.org/items/show/1698>

Laboratory Testing for Ebola:

<https://netec.org/2022/10/11/laboratory-testing-for-ebola/>

Laboratory Testing for Lassa Fever:

<https://repository.netecweb.org/items/show/1667>

Laboratory Testing for Marburg:

[Laboratory Resources: Marburg Virus Disease \(MVD\) · NETEC Resource Library \(netecweb.org\)](#)

Laboratory Activation Checklist:

<https://repository.netecweb.org/files/original/760672f218efe45fdf61c2d96991b2c2.docx>

WASTE MANAGEMENT AND CLEANING & DISINFECTION

Waste generated in the care of suspected or confirmed to have a viral hemorrhagic fever (VHF) is subject to procedures set forth by local, state, and federal regulations. Basic principles for spills of blood and other potentially infectious materials are outlined in the U.S. Occupational Safety and Health Administration (OSHA). Waste contaminated (or suspected to be contaminated) with certain VHFs is a Category A infectious substance regulated by the U.S. Department of Transportation Hazardous Materials Regulations (HMR; 49 CFR, Parts 171-180). Requirements in the HMR apply to any material DOT determines is capable of posing an unreasonable risk to health, safety, and property when transported in commerce. The EPA maintains lists of registered disinfectants that should be used to destroy certain pathogens. For a list of disinfectants that are effective against the VHF and analogous pathogens visit <https://www.epa.gov/pesticide-registration/list-l-disinfectants-use-against-ebola-virus#check>.

Waste Management and Cleaning and disinfection Items			
#	Item	Status Yes or No	Notes
1.	There is a written plan for the management of waste generated during the care of a person suspected or confirmed to have a pathogen, and it includes the following:	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1a.	A designated secured waste holding area where waste can be separated from the department and facility's normal waste holding area.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1b.	Staff training on high-risk biohazard waste management process including proper handling of human biological waste, used and unused medical equipment, used and unused disposable supplies, patient linen and clothing, and terminal cleaning of patient room.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1c.	Secure packaging/ containment of waste to include proper closure of biohazard bags and approved hard sided transport containers.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1d.	If required, a vendor licensed to transport category A infectious substance will transport the waste for off-site inactivation.	Yes <input type="checkbox"/> No <input type="checkbox"/>	

2.	There is a written cleaning and disinfection plan for the isolation area that includes the following:	Yes <input type="checkbox"/>	
2a.	Guidance on the type of PPE to be worn when performing cleaning and disinfection in the special pathogen isolation area.	Yes <input type="checkbox"/>	
2b.	A process to ensure an appropriate disinfectant has been selected and is available for use that is effective against the pathogen.	Yes <input type="checkbox"/>	
2c.	Detailed checklist(s) that guide staff in all steps to ensure safe and effective management of the space after the patient has been discharged or transferred.	Yes <input type="checkbox"/>	
2d.	Guidance and oversight of the cleaning and disinfection process by a special pathogens infection control expert.	Yes <input type="checkbox"/>	

Waste Management Resources/Guidance

Managing Solid Waste Contaminated with a Category A Infectious Substance:

[Planning Guidance for Handling Category A Solid Waste | PHMSA \(dot.gov\)](#)

Department of Transportation Special Permit 16279:

[SP16279 \(dot.gov\)](#)

Ebola-Associated Waste Management: <https://www.cdc.gov/vhf/ebola/clinicians/cleaning/waste-management.html>

Fact Sheet. Safe Handling, Treatment, Transport and Disposal of Ebola-Contaminated Waste:

https://www.osha.gov/sites/default/files/publications/OSHA_FS-3766.pdf

COVID-19 Waste Container Use: <https://repository.netecweb.org/files/original/7cc5c14094799b74298210150878a02f.pdf>

Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus:

<https://www.cdc.gov/vhf/ebola/clinicians/cleaning/hospitals.html>

TRANSPORTATION

Patients suspected or confirmed to have a VHF may require transportation either to or from your facility. Having a plan in place will facilitate the movement of the patient in a manner that maintains safety for facility and transportation staff.

Transportation Readiness Items			
#	Item	Status Yes or No	Notes
1.	There is a written plan to request the transfer of a patient suspected or confirmed to have a VHF that includes:	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1a.	Current contact information for local and state public health authorities, an identified EMS agency that can provide ACLS and/or BLS transport as needed, and a higher tier facility that the patient can be transferred to.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1b.	Guidance on how to prepare the patient for transport (e.g., protective ensemble and premedication considerations)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.	Your facility has identified a specific location and established processes for the transfer of patient care between EMS personnel and facility personnel.	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Transportation Resources/Guidance

NETEC: EMS Guidelines for Marburg Virus Disease, Revised October 3, 2024:

<https://netec.org/2023/03/09/ems-guidelines-for-marburg-virus-disease/>

EMS Infectious Disease Playbook:

<https://repository.netecweb.org/exhibits/show/ebola2021/item/16>

Guidance for Developing a Plan for Interfacility Transport of Persons Under Investigation or Confirmed Patients with Ebola Virus Disease in the United States:

<https://www.ems.gov/assets/interfacility-transport.pdf>

Example: Standard Operating Procedure (SOP) for Patient Handoff between a Health care Facility and a Transporting Ambulance:

<https://repository.netecweb.org/items/show/1762>

Example: Standard Operating Procedure (SOP) for Decontamination of an Ambulance that has Transported a Person under Investigation or Patient with Confirmed Ebola:

<https://repository.netecweb.org/items/show/1763>

The Joint Commission Infection Control Standard IC07.01.01 Resources/Guidance

NETEC Joint Commission Standards Exhibit Page:

[Joint Commission Standards for High Consequence Infectious Disease \(HCID\) Infection Control Resources · Joint Commission Standards for HCID Infection Control · NETEC Resource Library \(netecweb.org\)](#)

NETEC Webinar on the Joint Commission HCID Standards:

[NETEC Webinar](#)

The new and revised requirements for infection control in critical access hospitals and hospitals (IC.07.01.01 pgs. 6-8)

[R3 Report Issue 41: New and Revised Requirements for Infection Prevention and Control for Critical Access Hospitals and Hospitals | The Joint Commission](#)

Key Points to Understanding the IC.07.01.01 Requirements:

[High-consequence Infectious Diseases or Special Pathogens - Understanding The Requirements \(IC.07.01.01\) | Critical Access Hospital | Infection Prevention and Control IC | The Joint Commission](#)

Updated: 10/9/2024