When CCHF is suspected or confirmed, immediately isolate the patient in a single-bed room under contact precautions.

If there is no capacity to enable dedicated isolation space for a patient with suspected CCHF, coordinate the safe referral and transport of the patient to a health facility with capacity to enable transmission-based precautions. Patients with suspected CCHF cannot be placed in cohort isolation.

Monitor and ensure adherence to standard precautions and transmission-based precautions by health and care workers. Report any/all suspected or confirmed cases of CCHF to a relevant authority (e.g. Ministry of Health). Monitor for health and care worker exposures and health care-associated infections.

Patient placement

- Single-bed room (suspected cases)
- Cohort isolation (confirmed cases only)

After exiting the patient's room:

- Remove PPE in the designated area or just before leaving the room and perform hand hygiene.

Ensure consistent application of environmental controls:

- Clean (detergent and water) and disinfect (0.5% chlorine solution) the patient environment at least twice daily;
- Treat all waste generated during care as infectious waste:
  - Discard heavily soiled linens as infectious waste.
- Ensure appropriate management of laundry and linens.

Visitors and Caregivers

- To limit the number of visitors in the isolation room one family member or caregiver should be designated for patients receiving paediatric or neonatal care;
- Instruct visitors on the following:
  - How to perform hand hygiene according to the “WHO 5 moments”;
  - How to put-on and remove PPE;
  - Refrain from entering any patient rooms or procedure areas where aerosol-generating procedures (AGPs) are performed.

Special isolation requirement for AGPs.

Patients with suspected or confirmed CCHF requiring AGPs must be placed in an airborne infection isolation room with a minimum ventilation rate of 160 litres per second (6-12 air changes per hour) with the door kept closed when not needed for entry/exit.

When AGPs are performed:

- Perform hand hygiene.
- Wear a fluid resistant gown and a fit-tested respirator (at minimum, equivalent to N95, FFP2, KN95, or KF94 standard), eye protection (face shield or goggles), and examination gloves.
  - Perform respirator seal-check before entering room.
  - Exit room and close door before removing respirator.

For additional details see, Infection prevention and control and water, sanitation and hygiene measures for Crimean-Congo haemorrhagic fever in health-care settings: operational guide (https://iris.who.int/handle/10665/376796).