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Viral Hemorrhagic Fever (VHF) 2022 Case Definition | CDC  
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Viral Hemorrhagic Fever (VHF)  
2022 Case Definition  
Viral Hemorrhagic Fever (VHF)  
2022 Case Definition  
NOTE:  
A surveillance case definition is a set of uniform criteria used to define a disease for public health surveillance. Surveillance case definitions enable public health officials to classify and count cases consistently across reporting jurisdictions. Surveillance case definitions are not intended to be used by healthcare providers for making a clinical diagnosis or determining how to meet an individual patient’s health needs.  
CSTE Position Statement(s)  
21-ID-04  
Subtype(s)  
Crimean-Congo hemorrhagic fever virus  
Ebola Virus  
Lassa virus  
Lujo virus  
Marburg virus  
New World arenavirus - Chapare virus  
New World arenavirus – Guanarito virus  
New World arenavirus – Junin virus  
New World arenavirus – Machupo virus  
New World arenavirus – Sabia virus  
Background  
Viral hemorrhagic fevers (VHFs) refer to a group of illnesses that are caused by several families of viruses, including filoviruses (Ebola and Marburg viruses), Old World arenaviruses (Lassa and Lujo viruses), New World arenaviruses (e.g. Guanarito, Machupo, Junin, Sabia, and Chapare viruses), and Crimean Congo hemorrhagic fever virus. The Council of State and Territorial Epidemiologists (CSTE) position statement  21-ID-04 made three key updates to the previous 10-ID-19 position statement on VHFs: 1) modified the definition for fever from ≥40ºC to ≥38ºC/100.4ºF, 2) added Chapare virus, a re-emerging New World arenavirus, to those reportable under position statement 21-ID-04, and 3) amended the epidemiologic linkage criteria for exposure within the past 3 weeks to semen from a confirmed acute or clinically recovered case of VHF to remove the stipulated time period of exposure within 10 weeks of the VHF case’s onset of illness.  
Clinical Criteria  
An illness with acute onset of:  
Fever > 38°C/100.4°F  
AND  
One or more of the following clinical findings:  
severe headache  
muscle pain  
erythematous maculopapular rash on the trunk with fine desquamation 3–4 days after rash onset  
vomiting  
diarrhea  
abdominal pain  
bleeding not related to injury  
thrombocytopenia  
pharyngitis (Arenaviruses only)  
proteinuria (Arenaviruses only)  
retrosternal chest pain (Arenaviruses only)  
Laboratory Criteria  
Any one of the following:  
Detection of VHF\* viral antigens in blood by enzyme-linked immunosorbent assay (ELISA).  
VHF viral isolation in cell culture for blood or tissues.  
Detection of VHF-specific genetic sequence by reverse transcription polymerase chain reaction  (RT-PCR) from blood or tissues.  
Detection of VHF viral antigens in tissues by immunohistochemistry.  
\*VHF refers to viral hemorrhagic fever caused by filoviruses (Ebola virus, Marburg virus), Old World arenaviruses (Lassa and Lujo viruses), New World arenaviruses (Guanarito, Machupo, Junin, Sabia, and Chapare viruses), or viruses in the Bunyaviridae family (Rift valley fever virus, Crimean-Congo hemorrhagic fever virus). Rift valley fever is not currently a national notifiable condition.  
Epidemiologic Linkage  
One or more of the following exposures  
within the 3 weeks before onset of symptoms  
:  
Contact with blood or other body fluids of a patient with VHF  
Residence in—or travel to—a VHF endemic area or area with active transmission  
Work in a laboratory that handles VHF specimens  
Work in a laboratory that handles bats, rodents, or primates from a VHF endemic area or area with active transmission  
Sexual exposure to semen from a confirmed acute or clinically recovered case of VHF  
Criteria to Distinguish a New Case from an Existing Case  
A new case of VHF should be enumerated only if not previously counted as a case of VHF caused by the same virus as determined by laboratory evidence.\*  
\*Among the VHFs included in CSTE position statement 21-ID-04, reinfection with the same virus species has not been documented. There is a theoretical possibility that a VHF (ex. Ebola) survivor could be infected by a virus that causes one of the other VHFs included in CSTE position statement 21-ID-04 (ex. Lassa fever, Crimean-Congo hemorrhagic fever, etc.)  
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Case Classification  
Suspect  
Meets clinical criteria  
AND  
epidemiologic linkage criteria.  
Confirmed  
Meets laboratory criteria.  
Related Case Definition(s)  
Viral Hemorrhagic Fever (VHF) | 2025 Case Definition  
Viral Hemorrhagic Fever (VHF) | 2011 Case Definition  
Viral Hemorrhagic Fever (VHF) | 2010 Case Definition  
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