



County of Erie

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2009 H1N1 Influenza Provider Reporting Requirements and Laboratory Testing Priorities that will be Used by the Erie County Department of Health

Please distribute immediately to Community providers, staff in the Departments of Laboratory Medicine, Critical Care, Emergency Medicine, Family Practice, Internal Medicine, Infectious Disease, Infection Control, Pediatrics, Pulmonary Medicine, and all inpatient and outpatient units.

Background

As of September 19, 2009, the Centers for Disease Control and Prevention (CDC) reports more than 99% of circulating influenza viruses identified in the United States were 2009 H1N1 influenza (previously referred to as novel influenza A (H1N1)). CDC guidance recommends that once influenza activity has been documented in a community or geographic area, most patients with an uncomplicated illness consistent with influenza can be diagnosed clinically and do not require influenza testing for clinical management (www.cdc.gov/h1n1flu/guidance/diagnostic_tests.htm). Local, state and national surveillance data indicate most illnesses associated with 2009 H1N1 have been mild to moderate in severity.

Erie County H1N1 Surveillance

The Erie County Department of Health (ECDOH) has updated its influenza surveillance program to reflect current 2009 H1N1 influenza priorities. Surveillance for the 2009-2010 influenza season is focused on patients with severe illness or those who are part of an outbreak in a defined group, and may include both epidemiologic investigation and laboratory analyses. Surveillance activities will focus on the following:

- **Hospitalized patients with acute respiratory illness (ARI)**
- **Community and health care facility outbreaks**
- **Deaths associated with ARI**

Erie County Public Health Laboratory Testing

Laboratory testing for 2009 H1N1 influenza will continue at the Erie County Public Health Laboratory (ECPHL) for **surveillance purposes only** and **will be limited** to patients who have been pre-approved for testing by the ECDOH Epidemiology and Surveillance program. To get approval for laboratory testing, please call **(716) 858-7697** during regular business hours.

At this time, laboratory testing will only be approved for patients in the following groups:

- Hospitalized patients with influenza-like illness (ILI)*
- Hospitalized patients with acute febrile respiratory illness†

The ECPHL will only accept and process samples that have been pre-approved by the ECDOH Epidemiology and Surveillance program. Samples tested by the ECPHL will be tested for seasonal influenza A, seasonal influenza B and 2009 H1N1 influenza. Clinicians who encounter patients with a suspected case of 2009 H1N1 influenza should treat the patient based on the history and physical examination. Testing capacity for 2009 H1N1 influenza remains limited. Although not routinely recommended, clinicians who require diagnostic testing for 2009 H1N1 influenza may contact a commercial laboratory of their choice.

H1N1 Provider Reporting Requirements

2009 H1N1 influenza is a reportable disease in New York State. Providers are required to report all suspected cases who meet any of the reporting criteria below to the ECDOH Epidemiology and Surveillance program at **(716) 858-7697** during regular business hours. Patients should be reported regardless of the results of any Influenza A testing since the use of Influenza A as a screen for 2009 H1N1 influenza has yielded false negative results.

Clinicians **must** report:

1. Hospitalized patients with:
 - Influenza-like illness (ILI)*
 - Acute febrile respiratory illness†
2. Death in any patient who meets one of the following criteria:
 - Death of an individual with influenza-like illness (ILI)* or acute febrile respiratory illness†
 - Death of an individual confirmed or suspected to have Influenza A or 2009 H1N1 influenza

Clinicians should be prepared to report the following information:

- Patient demographics (name, address, phone number, date of birth)
- Symptoms and date of onset
- Underlying medical conditions
- Treatment provided (e.g. antiviral medication, mechanical ventilation)
- Date of hospitalization
- Physician/health care provider (name and phone number)

***Influenza-like-illness (ILI)** is defined as fever (temperature $\geq 100^{\circ}\text{F}$ or 37.8°C) and a cough and/or sore throat in the absence of a known cause other than influenza

†**Acute respiratory febrile illness** is defined as ILI or fever with either pneumonia, acute respiratory distress syndrome (ARDS), or respiratory distress in the absence of a known cause other than influenza

Health Category Definitions:

Health Alert FLASH: conveys the highest level of importance due to a large-scale, catastrophic public health emergency; warrants immediate action or attention

Health Alert Priority: conveys the highest level of importance; warrants immediate action or attention to a health problem or situation

Health Advisory: provides important information for a specific incident or situation; may not require immediate action

Health Update: provides updated information regarding an incident or situation; no immediate action necessary