



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Influenza Surveillance, 2009-2010 Season Summary of Special Instructions for Hospitals in New Haven County

The various public health surveillance systems used to monitor the 2009 influenza A (H1N1) pandemic in Connecticut will be modified as needed based on changes in the characteristics of the pandemic (http://www.ct.gov/dph/lib/dph/infectious_diseases/ctepinews/vol29no6.pdf). The Emerging Infections Program (EIP) at the Yale University School of Public Health is assisting the Department of Public Health (DPH) in surveillance activities in New Haven County and in this capacity is acting as an agent of the State. Several surveillance changes include reporting requirements that affect hospitals. Below is a summary of the reporting requirements. *For these reportable events hospitals need only notify the Yale EIP or the DPH as indicated. The Yale EIP or the DPH will share reports with the relevant local health departments.*

Hospitalization due to influenza

- Must be reported on the day of recognition or strong suspicion (i.e. patients with compatible illness regardless of the results of the initial rapid and/or DFA test), all cases should be tested for influenza by rRT-PCR; do not wait for the results of PCR testing to report cases.
- After hours or on holidays reporting should be done the next normal business day.
- Reporting is done by sending the case report form via fax to Yale at 203-764-4357.
- For questions call Yale at 203-764-5942.
- Case report form attached.

Death due to influenza

- Must be reported on the day of recognition or strong suspicion (i.e. patients with compatible illness), please save respiratory specimens for post-mortem PCR testing.
- Reporting is done by calling the DPH during normal business hours at 860-509-7994.
- Also send the hospitalization case report form via fax to DPH at 860-509-7910.
- After hours or on holidays reporting should be done by calling the DPH at 860-509-8000.

Guillain-Barré syndrome

- Must be reported on the day of recognition or strong suspicion.
- While GBS surveillance is being conducted to identify potential links to pandemic H1N1 influenza vaccination, all cases should be reported regardless of the patient's vaccination status.
- Reporting is done by calling the DPH during normal business hours at 860-509-7994.
- After hours or on holidays reporting should be done by calling the DPH at 860-509-8000.
- These instructions are for healthcare providers other than neurologists – they have been contacted separately and are aware of specific instruction for their medical specialty.
- Note that the HASS surveillance component identifies cases of compatible clinical syndromes and is not a substitute for reporting cases of GBS if a specific diagnosis is made.

Criteria for Submission of specimens to the DPH Public Health Laboratory

- Hospitalized patients with influenza-like illness. Specimens for PCR testing from these patients are vital for identifying the influenza subtype circulating, monitoring changes as the season progresses and determining the efficacy of the vaccines; there is no charge to the patient or healthcare provider.
- Healthcare workers with influenza-like illness and a negative rapid influenza test (persons with a positive rapid test should be assumed to be infected with the currently circulating 2009 H1N1 virus).
- Laboratory information including submission criteria and instructions are available at: <http://www.ct.gov/ctfluwatch/cwp/view.asp?a=2533&q=314806> - laboratory.