

EpiNotes

Florida Department of Health - Hillsborough County Disease Surveillance Newsletter November 2015

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Articles and Attachments: The following are included this month:

Page 1 – Hand, Foot and Mouth Disease
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Page 6 – Reportable Diseases/Conditions in Florida Practitioner List
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Hand, Foot and Mouth Disease Maria Deluca and Samantha Spoto

Hand, foot and mouth disease (HFMD) is a common viral illness that mainly affects children. It is caused by multiple types of viruses, mainly coxsackieviruses and enteroviruses. Adults can also become infected with and transmit these viruses but more commonly will not have any symptoms. The first symptoms are usually fever, loss of appetite, sore throat, and malaise. A few days after symptoms begin, sores that blister develop in the mouth and a rash may develop on the palms of the hands and soles of the feet. The rash may contain blisters, and can also appear on other parts of the body. The viruses are spread through blister fluid, nasal secretions, and fecal matter. Handwashing is the best way to prevent the spread of illness.

HFMD is not a reportable disease here in the state of Florida; however, outbreaks of any disease within a facility are reportable to your local health department. Recently, we have been receiving an increased amount of reports regarding HFMD outbreaks in childcare settings. There are no exclusion recommendations specific to HFMD for children in a child care setting because many children with the virus may show no symptoms and the persons may be infectious before the sores are present and for several weeks after symptoms have disappeared. In general, children with a fever should be excluded until fever-free for 24 hours.

Mission: To protect, promote & improve the health of all people in Florida through integrated state & community efforts.

Vision: To be **the Healthiest State** in the Nation

Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General & Secretary



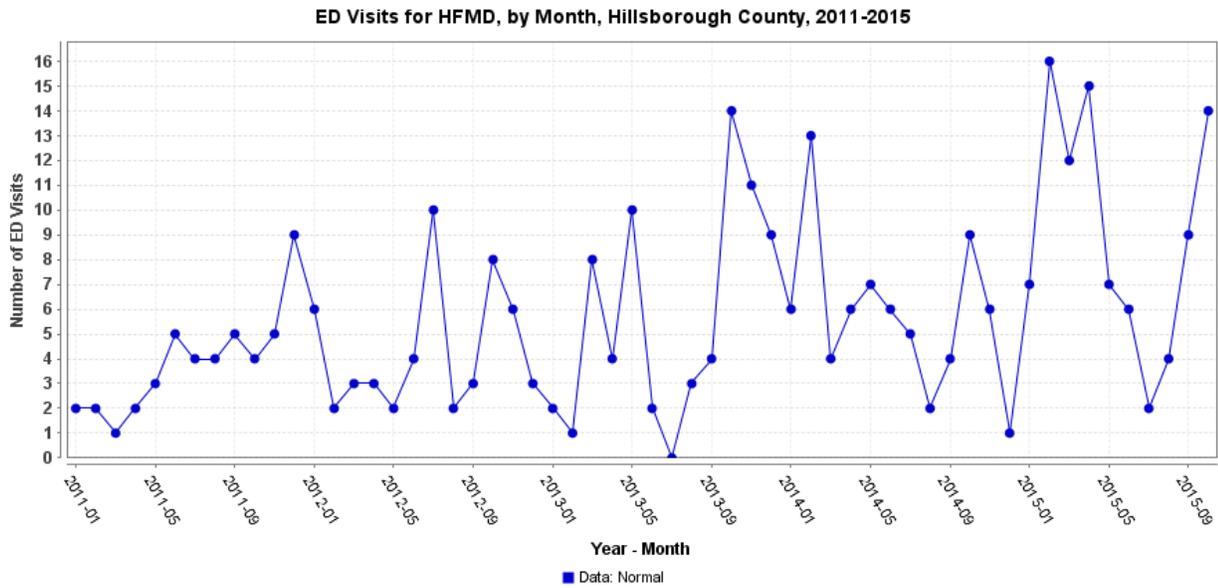


Figure 1: Emergency Department visits for Hand, Foot, and Mouth Disease, by month at Hillsborough County hospitals from 2011-2015.

Reportable Disease Surveillance Data

Disease Category	Annual Totals			3 Year Average	Year-to-date	
	2012	2013	2014		Jan - Oct 14	Jan -Oct 15
Vaccine Preventable Diseases						
Diphtheria	0	0	0	0.00	0	0
Measles	0	0	0	0.00	0	0
Mumps	0	0	2	0.67	2	1
Pertussis	119	95	65	93.00	59	29
Poliomyelitis	0	0	0	0.00	0	0
Rubella	0	0	0	0.00	0	0
Smallpox	0	0	0	0.00	0	0
Tetanus	0	0	0	0.00	0	0
Varicella	45	65	59	56.33	50	62
CNS Diseases & Bacteremias						
Creutzfeldt-Jakob Disease	3	1	1	1.67	1	3
<i>H. influenzae</i> (Invasive Disease in children <5)	2	2	3	2.33	2	2
Listeriosis	1	5	2	2.67	2	2
Meningitis (Bacterial, Cryptococcal, Mycotic)	5	11	12	9.33	11	15
Meningococcal Disease	3	6	3	4.00	3	2
Staphylococcus aureus (VISA, VRSA)	1	1	0	0.67	0	0
<i>S. pneumoniae</i> (Invasive Disease in children <6)	5	7	5	5.67	4	2
Enteric Infections						
Campylobacteriosis	105	134	189	142.67	147	235
Cholera	1	0	0	0.33	0	0
Cryptosporidiosis	77	59	354	163.33	333	89
Cyclospora	2	9	4	5.00	4	0
Escherichia coli, Shiga toxin-producing (STEC)	22	30	20	24.00	19	25
Giardiasis	54	56	64	58.00	55	45
Hemolytic Uremic Syndrome	1	2	1	1.33	1	2
Salmonellosis	331	303	362	332.00	304	265
Shigellosis	36	63	68	55.67	41	232
Typhoid Fever	0	0	0	0.00	0	0
Viral Hepatitis						
Hepatitis A	5	10	5	6.67	5	4
Hepatitis B (Acute)	39	56	61	52.00	49	57
Hepatitis C (Acute)	26	38	28	30.67	24	38
Hepatitis +HBsAg in Pregnant Women	38	30	35	34.33	29	23
Hepatitis D, E, G	1	0	0	0.33	0	1

Reportable Disease Surveillance Data

Disease Category	Annual Totals			3 Year Average	Year-to-date	
	2012	2013	2014		Jan - Oct 14	Jan -Oct 15
Vectorborne, Zoonoses						
Chikungunya	N/A	N/A	36	N/A	23	10
Dengue	5	4	6	5.00	4	4
Eastern Equine Encephalitis	0	1	0	0.33	0	0
Ehrlichiosis/Anaplasmosis	0	2	2	1.33	2	0
Leptospirosis	0	0	0	0.00	0	1
Lyme Disease	9	12	9	10.00	6	14
Malaria	7	8	11	8.67	9	2
Plague	0	0	0	0.00	0	0
Psittacosis	0	0	0	0.00	0	0
Q Fever (Acute and Chronic)	0	0	0	0.00	0	0
Rabies (Animal)	5	6	5	5.33	4	2
Rabies (Human)	0	0	0	0.00	0	0
Rocky Mountain Spotted Fever	1	1	0	0.67	0	0
St. Louis Encephalitis	0	0	0	0.00	0	0
Trichinellosis	0	0	0	0.00	0	0
Tularemia	0	0	0	0.00	0	0
Typhus Fever (Epidemic)	0	0	0	0.00	0	0
Venezuelan Equine Encephalitis	0	0	0	0.00	0	0
West Nile Virus	1	0	0	0.33	0	2
Western Equine Encephalitis	0	0	0	0.00	0	0
Yellow Fever	0	0	0	0.00	0	0
Others						
Anthrax	0	0	0	0.00	0	0
Botulism, Foodborne	0	0	0	0.00	0	0
Botulism, Infant	0	0	0	0.00	0	0
Brucellosis	0	0	0	0.00	0	0
Glanders	0	0	0	0.00	0	0
Hansen's Disease (Leprosy)	2	2	0	1.33	0	0
Hantavirus Infection	0	0	0	0.00	0	0
Legionellosis	8	18	8	11.33	8	19
Melioidosis	0	0	0	0.00	0	0
Vibriosis	13	13	7	11.00	7	9

Reportable Disease Surveillance Data

Disease Category	Annual Totals			3 Year Average	Year-to-date	
	2012	2013	2014		Jan - Oct 14	Jan -Oct 15
Chemicals/Poisoning						
Arsenic	0	0	0	0.00	0	0
Carbon Monoxide	4	5	22	10.33	7	20
Lead	329	173	246	249.33	191	258
Mercury	0	0	0	0.00	0	0
Pesticide	4	13	42	19.67	3	58
Influenza						
Influenza, Pediatric Associated Mortality	0	1	1	0.67	1	0
Influenza, Novel or Pandemic Strain	0	0	0	0.00	0	0
HIV/AIDS						
AIDS	172	231	178	193.67	155	161
HIV Infection	327	403	443	391.00	379	406
STDs						
Chlamydia	7124	7220	7461	7268.33	6185	6342
Gonorrhea	2160	2023	1848	2010.33	1570	1670
Syphilis, Congenital	6	3	4	4.33	4	3
Syphilis, Latent	129	189	166	161.33	148	173
Syphilis, Early	117	124	141	127.33	129	127
Syphilis, Infectious	155	156	208	173.00	178	192
Tuberculosis						
TB	51	54	51	52.00	37	33
Food and Waterborne Illness Outbreaks						
Food and Waterborne Cases	74	73	55	67.33	51	27
Food and Waterborne Outbreaks	4	4	3	3.67	2	2

Reportable Diseases/Conditions in Florida

Practitioner List (Laboratory Requirements Differ)

Effective June 4, 2014



Did you know that you are required* to report certain diseases to your local county health department?

- ! Report immediately 24/7 by phone upon initial suspicion or laboratory test order
- ☎ Report immediately 24/7 by phone
 - Report next business day
 - + Other reporting timeframe

Birth Defects

- + Congenital anomalies
- + Neonatal abstinence syndrome (NAS)

Cancer

- + Cancer, excluding non-melanoma skin cancer and including benign and borderline intracranial and CNS tumors

HIV/AIDS

- + Acquired immune deficiency syndrome (AIDS)
- + Human immunodeficiency virus (HIV) infection
 - HIV, exposed infants <18 months old born to an HIV-infected woman

STDs

- Chancroid
- Chlamydia
- Conjunctivitis in neonates <14 days old
- Gonorrhea
- Granuloma inguinale
- Herpes simplex virus (HSV) in infants <60 days old with disseminated infection and liver involvement; encephalitis; and infections limited to skin, eyes, and mouth; anogenital HSV in children <12 years old
- Human papillomavirus (HPV), associated laryngeal papillomas or recurrent respiratory papillomatosis in children <6 years old; anogenital papillomas in children <12 years old
- Lymphogranuloma venereum (LGV)
- Syphilis
- ☎ Syphilis in pregnant women and neonates

Tuberculosis

- Tuberculosis (TB)

All Others

- ! Outbreaks of any disease, any case, cluster of cases, or exposure to an infectious or non-infectious disease, condition, or agent found in the general community or any defined setting (e.g., hospital, school, other institution) not listed that is of urgent public health significance

☎ Amebic encephalitis

! Anthrax

- Arsenic poisoning
- Arboviral diseases not otherwise listed

! Botulism, foodborne, wound, and unspecified

- Botulism, infant

! Brucellosis

- California serogroup virus disease
- Campylobacteriosis
- Carbon monoxide poisoning
- Chikungunya fever

☎ Chikungunya fever, locally acquired

! Cholera (*Vibrio cholerae* type O1)

- Ciguatera fish poisoning
- Creutzfeldt-Jakob disease (CJD)
- Cryptosporidiosis
- Cyclosporiasis
- Dengue fever

☎ Dengue fever, locally acquired

! Diphtheria

- Eastern equine encephalitis
- Ehrlichiosis/anaplasmosis
- *Escherichia coli* infection, Shiga toxin-producing
- Giardiasis, acute

! Glanders

! *Haemophilus influenzae* invasive disease in children <5 years old

- Hansen's disease (leprosy)

☎ Hantavirus infection

☎ Hemolytic uremic syndrome (HUS)

☎ Hepatitis A

- Hepatitis B, C, D, E, and G
- Hepatitis B surface antigen in pregnant women or children <2 years old

☎ Herpes B virus, possible exposure

! Influenza A, novel or pandemic strains

☎ Influenza-associated pediatric mortality in children <18 years old

- Lead poisoning
- Legionellosis
- Leptospirosis

☎ Listeriosis

- Lyme disease
- Malaria

! Measles (rubeola)

! Melioidosis

- Meningitis, bacterial or mycotic

! Meningococcal disease

- Mercury poisoning

- Mumps

☎ Neurotoxic shellfish poisoning

☎ Pertussis

- Pesticide-related illness and injury, acute

! Plague

! Poliomyelitis

- Psittacosis (ornithosis)
- Q Fever

☎ Rabies, animal or human

! Rabies, possible exposure

! Ricin toxin poisoning

- Rocky Mountain spotted fever and other spotted fever rickettsioses

! Rubella

- St. Louis encephalitis

- Salmonellosis

- Saxitoxin poisoning (paralytic shellfish poisoning)

! Severe acute respiratory disease syndrome associated with coronavirus infection

- Shigellosis

! Smallpox

☎ Staphylococcal enterotoxin B poisoning

☎ *Staphylococcus aureus* infection, intermediate or full resistance to vancomycin (VISA, VRSA)

- *Streptococcus pneumoniae* invasive disease in children <6 years old

- Tetanus

- Trichinellosis (trichinosis)

! Tularemia

☎ Typhoid fever (*Salmonella* serotype Typhi)

! Typhus fever, epidemic

! Vaccinia disease

- Varicella (chickenpox)

! Venezuelan equine encephalitis

- Vibriosis (infections of *Vibrio* species and closely related organisms, excluding *Vibrio cholerae* type O1)

! Viral hemorrhagic fevers

- West Nile virus disease

! Yellow fever

*Section 381.0031 (2), *Florida Statutes* (F.S.), provides that "Any practitioner licensed in this state to practice medicine, osteopathic medicine, chiropractic medicine, naturopathy, or veterinary medicine; any hospital licensed under part I of chapter 395; or any laboratory licensed under chapter 483 that diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health." Florida's county health departments serve as the Department's representative in this reporting requirement. Furthermore, Section 381.0031 (4), F.S. provides that "The department shall periodically issue a list of infectious or noninfectious diseases determined by it to be a threat to public health and therefore of significance to public health and shall furnish a copy of the list to the practitioners..."

Florida Department of Health, Practitioner Disease Report Form



Complete the following information to notify the Florida Department of Health of a reportable disease or condition, as required by Chapter 64D-3, *Florida Administrative Code (FAC)*. This can be filled in electronically.

Print Form

Patient Information

SSN: _____

Last name: _____

First name: _____

Middle: _____

Parent name: _____

Gender: Male Female Unk
 Pregnant: Yes No Unk

Birth date: _____ Death date: _____

Race: American Indian/Alaska Native White
 Asian/Pacific Islander Other
 Black Unk

Ethnicity: Hispanic Non-Hispanic Unk

Address: _____

ZIP: _____ County: _____

City: _____ State: _____

Home phone: _____

Other phone: _____

Emer. phone: _____

Email: _____

Medical Information

MRN: _____

Date onset: _____ Date diagnosis: _____

Died: Yes No Unk

Hospitalized: Yes No Unk

Hospital name: _____

Date admitted: _____ Date discharged: _____

Insurance: _____

Treated: Yes No Unk

Specify treatment:

Laboratory testing: Yes No Unk Attach laboratory result(s) if available.

Provider Information

Physician: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

Email: _____

Reportable Diseases and Conditions in Florida

Notify upon suspicion 24/7 by phone **Notify upon diagnosis 24/7 by phone**

HIV/AIDS and HIV-exposed newborn notification should be made using the Adult HIV/AIDS Confidential Case Report Form, CDC 50.42A (revised March 2013) for cases in people ≥13 years old or the Pediatric HIV/AIDS Confidential Case Report, CDC 50.42B (revised March 2003) for cases in people <13 years old. Please contact your local county health department for these forms (visit <http://floridahealth.gov/chdepcontact> to obtain CHD contact information). Congenital anomalies and neonatal abstinence syndrome notification occurs when these conditions are reported to the Agency for Health Care Administration in its inpatient discharge data report pursuant to Chapter 59E-7 FAC. Cancer notification should be directly to the Florida Cancer Data System (see <http://fcds.med.miami.edu>). All other notifications should be to the CHD where the patient resides. To obtain CHD contact information, see <http://floridahealth.gov/chdepcontact>. See <http://floridahealth.gov/diseasereporting> for other reporting questions.

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Amebic encephalitis | <input type="checkbox"/> Glanders | <input type="checkbox"/> Melioidosis | <input type="checkbox"/> Staphylococcal enterotoxin B poisoning |
| <input type="checkbox"/> Anthrax | <input type="checkbox"/> Gonorrhea | <input type="checkbox"/> Meningitis, bacterial or mycotic | <input type="checkbox"/> Streptococcus pneumoniae invasive disease in child <6 years old |
| <input type="checkbox"/> Arsenic poisoning | <input type="checkbox"/> Granuloma inguinale | <input type="checkbox"/> Meningococcal disease | <input type="checkbox"/> Syphilis |
| <input type="checkbox"/> Arboviral disease not listed here | <input type="checkbox"/> Haemophilus influenzae invasive disease in child <5 years old | <input type="checkbox"/> Mercury poisoning | <input type="checkbox"/> Syphilis in pregnant woman or neonate |
| <input type="checkbox"/> Botulism, infant | <input type="checkbox"/> Hansen's disease (leprosy) | <input type="checkbox"/> Mumps | <input type="checkbox"/> Tetanus |
| <input type="checkbox"/> Botulism, foodborne | <input type="checkbox"/> Hantavirus infection | <input type="checkbox"/> Neurotoxic shellfish poisoning | <input type="checkbox"/> Trichinellosis (trichinosis) |
| <input type="checkbox"/> Botulism, wound or unspecified | <input type="checkbox"/> Hemolytic uremic syndrome (HUS) | <input type="checkbox"/> Pertussis | <input type="checkbox"/> Tuberculosis (TB) |
| <input type="checkbox"/> Brucellosis | <input type="checkbox"/> Hepatitis A | <input type="checkbox"/> Pesticide-related illness and injury, acute | <input type="checkbox"/> Tularemia |
| <input type="checkbox"/> California serogroup virus disease | <input type="checkbox"/> Hepatitis B, C, D, E, and G | <input type="checkbox"/> Plague | <input type="checkbox"/> Typhoid fever (Salmonella serotype Typhi) |
| <input type="checkbox"/> Campylobacteriosis | <input type="checkbox"/> Hepatitis B surface antigen in pregnant woman or child <2 years old | <input type="checkbox"/> Poliomyelitis | <input type="checkbox"/> Typhus fever, epidemic |
| <input type="checkbox"/> Carbon monoxide poisoning | <input type="checkbox"/> Herpes B virus, possible exposure | <input type="checkbox"/> Psittacosis (ornithosis) | <input type="checkbox"/> Vaccinia disease |
| <input type="checkbox"/> Chancroid | <input type="checkbox"/> Herpes simplex virus (HSV) in infant <60 days old | <input type="checkbox"/> Q Fever | <input type="checkbox"/> Varicella (chickenpox) |
| <input type="checkbox"/> Chikungunya fever | <input type="checkbox"/> HSV, anogenital in child <12 years old | <input type="checkbox"/> Rabies, animal | <input type="checkbox"/> Venezuelan equine encephalitis |
| <input type="checkbox"/> Chikungunya fever, locally acquired | <input type="checkbox"/> Human papillomavirus (HPV), laryngeal papillomas or recurrent respiratory papillomatosis in child <6 years old | <input type="checkbox"/> Rabies, human | <input type="checkbox"/> Vibriosis (infections of Vibrio species and closely related organisms, excluding Vibrio cholerae type O1) |
| <input type="checkbox"/> Chlamydia | <input type="checkbox"/> HPV, anogenital papillomas in child <12 years old | <input type="checkbox"/> Rabies, possible exposure | <input type="checkbox"/> Viral hemorrhagic fevers |
| <input type="checkbox"/> Cholera (Vibrio cholerae type O1) | <input type="checkbox"/> Influenza A, novel or pandemic strains | <input type="checkbox"/> Ricin toxin poisoning | <input type="checkbox"/> West Nile virus disease |
| <input type="checkbox"/> Ciguatera fish poisoning | <input type="checkbox"/> Influenza-associated pediatric mortality in child <18 years old | <input type="checkbox"/> Rocky Mountain spotted fever or other spotted fever rickettsiosis | <input type="checkbox"/> Yellow fever |
| <input type="checkbox"/> Conjunctivitis in neonate <14 days old | <input type="checkbox"/> Lead poisoning | <input type="checkbox"/> Rubella | <input type="checkbox"/> Outbreaks of any disease, any case, cluster of cases, or exposure to an infectious or non-infectious disease, condition, or agent found in the general community or any defined setting (e.g., hospital, school, other institution) not listed above that is of urgent public health significance. Please specify: |
| <input type="checkbox"/> Creutzfeldt-Jakob disease (CJD) | <input type="checkbox"/> Legionellosis | <input type="checkbox"/> St. Louis encephalitis | |
| <input type="checkbox"/> Cryptosporidiosis | <input type="checkbox"/> Leptospirosis | <input type="checkbox"/> Salmonellosis | |
| <input type="checkbox"/> Cyclosporiasis | <input type="checkbox"/> Listeriosis | <input type="checkbox"/> Saxitoxin poisoning (paralytic shellfish poisoning) | |
| <input type="checkbox"/> Dengue fever | <input type="checkbox"/> Lyme disease | <input type="checkbox"/> Severe acute respiratory disease syndrome associated with coronavirus infection | |
| <input type="checkbox"/> Dengue fever, locally acquired | <input type="checkbox"/> Lymphogranuloma venereum (LGV) | <input type="checkbox"/> Shigellosis | |
| <input type="checkbox"/> Diphtheria | <input type="checkbox"/> Malaria | <input type="checkbox"/> Smallpox | |
| <input type="checkbox"/> Eastern equine encephalitis | <input type="checkbox"/> Measles (rubeola) | <input type="checkbox"/> Staphylococcus aureus infection, intermediate or full resistance to vancomycin (VISA, VRSA) | |
| <input type="checkbox"/> Ehrlichiosis/anaplasmosis | | | |
| <input type="checkbox"/> Escherichia coli infection, Shiga toxin-producing | | | |
| <input type="checkbox"/> Giardiasis, acute | | | |

Comments



Week 45: November 8-14, 2015

Summary

State influenza and influenza-like illness (ILI) activity:

- Florida reported sporadic activity to the Centers for Disease Control and Prevention (CDC) in week 45.
- **Influenza activity has remained relatively stable in recent weeks.** While activity has remained low, these early season low activity levels are not uncommon and are not predictive of an overall mild influenza season.
 - Of concern, seasons where influenza A (H3) circulates predominantly are generally more severe, particularly in children <5 and adults ≥65 years old.
 - Statewide emergency department (ED) and urgent care center (UCC) ILI visits have remained stable in all age groups (for the last five weeks).
- The preliminary estimated number of deaths due to pneumonia and influenza is similar to levels seen in previous years at this time.
- All Florida counties reported mild or no influenza activity in week 45.
- No influenza-associated pediatric deaths were reported in week 45 and none have been reported so far during the 2015-16 influenza season.
- One outbreak of rhinovirus was reported in an assisted living facility in Pasco County in week 45.
- The proportion of specimens testing positive for influenza at the Bureau of Public Health Laboratories (BPHL) has remained low in recent weeks but is expected to increase as the 2015-16 influenza season progresses.
- Influenza A (H3) is the most commonly circulating virus identified by BPHL so far in the 2015-16 season.

National influenza activity:

- Influenza activity levels remain low nationally but are increasing.
- The predominantly circulating strain identified nationally so far this season is influenza A (H3). Other strains of influenza are also circulating, but at lower levels.
- The CDC recommends vaccination as long as influenza viruses are circulating.
 - To learn more, please visit: <http://www.cdc.gov/flu/weekly/>.
- Highly pathogenic avian influenza (HPAI) H5 viruses have been identified in U.S. backyard and commercial flocks of birds during the spring and summer of 2015. HPAI H5 has not been identified in Florida birds, but identifications are anticipated. No human HPAI infections have been identified in Florida or the rest of the nation.
 - To learn more about HPAI, please visit: www.floridahealth.gov/novelflu.

Weekly State Influenza Activity

Sporadic

For more information
see page 2 ▶



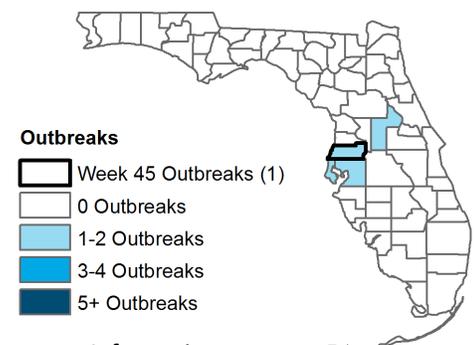
Predominately Circulating Strain

A (H3)

For more information
see page 6 ▶

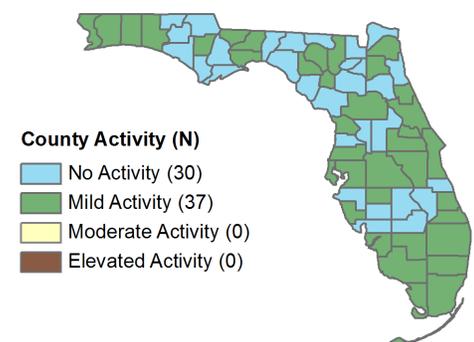


Influenza and ILI Outbreaks Reported as of 11/18/15



For more information see page 5 ▶

County Influenza Activity



For more information see page 4 ▶

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