

EpiNotes

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

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Articles and Attachments: The following are included this month:

Page 1 – Summary of Updates from the State

Page 2 – Reportable Disease Surveillance Data

Page 5 – Reportable Diseases/Conditions in Florida Practitioner List

Page 6 – Florida Department of Health, Practitioner Disease Report Form

Page 7 – Week 51, 2015 Florida Flu Review (Summary Page)

Summary of Ebola Virus Disease (EVD) Updates from the State

- **Summary of Guidance for 21-day County Health Department Monitoring of Travelers from Countries Currently Experiencing an Outbreak of Ebola Virus Disease**

The state guidance has been updated so that low risk travelers returning from Guinea will have their temperature monitored twice daily via telephone by the local county health department. **As of December 22, the CDC will no longer provide notification of incoming travelers from Sierra Leone. And as of December 30, the CDC will no longer provide notification of incoming travelers from Guinea.**

For more information, see:

<http://www.floridahealth.gov/diseases-and-conditions/ebola/documents/ebola-guidance-monitoring-travelers-summary.pdf>

- **Guidance for Inpatient Care Management of Patients with Suspected or Confirmed Ebola Virus**

The state announced a draft plan to transport patients with EVD to regional treatment centers, established by the federal government in each of the FEMA regions. The regional center for Florida is at Emory University in Atlanta, GA. The primary means of transport for any patient in Florida will be by air, using aircraft from Phoenix Air stationed outside of Atlanta, which are under contract with the federal government. For more information, see:

<http://www.floridahealth.gov/diseases-and-conditions/ebola/documents/ebola-guidance-inpatient-care-management.pdf>

Reportable Disease Surveillance Data

Disease Category	Annual Totals			3 Year Average	Year-to-Date	
	2012	2013	2014		Jan-Nov 2014	Jan-Nov 2015
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	63	34
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	54	69
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	3	2
Listeriosis	1	5	2	2.67	2	2
Meningitis (Bacterial, Cryptococcal, Mycotic)	5	11	12	9.33	10	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	172	257
Cholera	1	0	0	0.33	0	0
Cryptosporidiosis	77	59	354	163.33	342	95
Cyclospora	2	9	4	5.00	4	1
Escherichia coli, Shiga toxin-producing (STEC)	22	30	20	24.00	4	25
Giardiasis	54	56	64	58.00	59	48
Hemolytic Uremic Syndrome	1	2	1	1.33	1	2
Salmonellosis	331	303	362	332.00	330	288
Shigellosis	36	63	68	55.67	58	234
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	54	63
Hepatitis C (Acute)	26	38	28	30.67	26	43
Hepatitis +HBsAg in Pregnant Women	38	30	35	34.33	34	25
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-Nov 2014	Jan-Nov 2015
Vectorborne, Zoonoses						
Chikungunya	N/A	N/A	36	N/A	33	9
Dengue	5	4	6	5.00	5	5
Eastern Equine Encephalitis	0	1	0	0.33	0	0
Ehrlichiosis/Anaplasmosis	0	2	2	1.33	1	0
Leptospirosis	0	0	0	0.00	0	1
Lyme Disease	9	12	9	10.00	7	15
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	21
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-Nov 2014	Jan-Nov 2015
Chemicals/Poisoning						
Arsenic	0	0	0	0.00	0	0
Carbon Monoxide	4	5	22	10.33	14	20
Lead	329	173	246	249.33	234	261
Mercury	0	0	0	0.00	0	2
Pesticide	4	13	42	19.67	3	32
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	168	185
HIV Infection	327	403	443	391.00	414	443
STDs						
Chlamydia	7124	7220	7461	7268.33	NA	NA
Gonorrhea	2160	2023	1848	2010.33	NA	NA
Syphilis, Congenital	6	3	4	4.33	NA	NA
Syphilis, Latent	129	189	166	161.33	NA	NA
Syphilis, Early	117	124	141	127.33	NA	NA
Syphilis, Infectious	155	156	208	173.00	NA	NA
Tuberculosis						
TB	51	54	51	52.00	44	34
Food and Waterborne Illness Outbreaks						
Food and Waterborne Cases	74	73	55	67.33	58	27
Food and Waterborne Outbreaks	4	4	3	3.67	3	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

Florida FLU REVIEW

2015-16
season

Summary

Week 51: December 20-26, 2015

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

- Florida reported sporadic activity to the Centers for Disease Control and Prevention (CDC) in week 51.
- **Overall the influenza season has been mild, however influenza activity has increased in week 51 and peak activity is yet to come.** While activity has remained low, early season low activity levels are not necessarily predictive of an overall mild influenza season.
 - Thus far, influenza A (H3) is the predominately circulating strain. Seasons where influenza A (H3) is the predominately circulating strain are generally more severe, particularly in children <5 years old and adults ≥65 years old, than other seasons.
- The preliminary estimated number of deaths due to pneumonia and influenza is below levels seen in previous years at this time.
- In week 51, all counties reported mild or no influenza activity.
- No influenza-associated pediatric deaths were reported in week 51, however one influenza-associated pediatric death has been reported so far in the 2015-16 influenza season.
 - While rare, sadly, Florida receives reports of influenza-associated pediatric deaths each year. Most deaths occur in unvaccinated children with underlying health conditions.
- No outbreaks of influenza or ILI were reported in week 51.
- In week 51, the percent of specimens testing positive for influenza at the Bureau of Public Health Laboratories (BPHL) decreased and is below levels seen in previous years at this time.
- In the 2015-16 season, BPHL has identified influenza A (H3) as the most commonly circulating influenza virus so far in Florida: 51% of 53 influenza positive specimens were typed as influenza A (H3). Low levels influenza A (2009 H1N1), influenza B Yamagata lineage, and influenza B Victoria lineage have also been identified as circulating at this time.

National influenza activity:

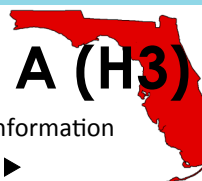
- National influenza activity levels are increasing but remain low.
- While influenza A (H3) has been most predominately circulating strain since October 1, in the past two weeks, influenza A (2009 H1N1) has predominated.
- **The vast majority of circulating flu viruses analyzed this season remain similar to the vaccine virus components for this season's flu vaccines.** CDC recommends an annual flu vaccine for everyone 6 months of age and older. **If you have not gotten vaccinated yet this season, you should get vaccinated now.**
 - To learn more, please visit: 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, please visit: www.floridahealth.gov/novelflu.

Weekly State Influenza Activity


Sporadic

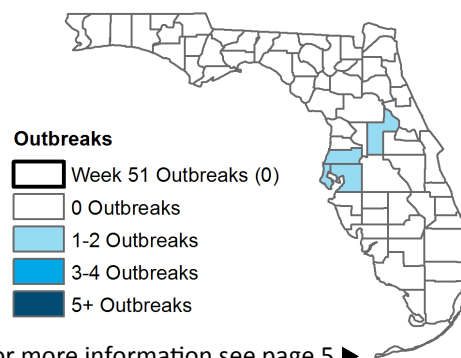
For more information
see page 2 ►

Predominately Circulating Strain


A (H3)

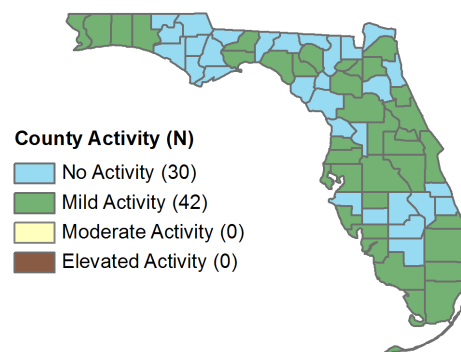
For more information
see page 6 ►

Influenza and ILI Outbreaks Reported as of 12/30/15



For more information see page 5 ►

County Influenza Activity



For more information see page 4 ►

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Posted December 30, 2015 on the Bureau of Epidemiology (BOE) website: floridahealth.gov/floridaflu

Produced by the BOE, Florida Department of Health

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