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TO REPORT A DISEASE:

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Zika Fever Update (As of November 16, 2016)

The total number of Zika cases reported in Florida as of today is 1,165.

Infection Type	Infection Count
Travel-Related Infections of Zika	927
Locally Acquired Infections of Zika	225
Undetermined	13
Pregnant Women with Lab-Evidence of Zika	153

Note, these categories are not mutually exclusive and cannot be added together. Please visit our [website](#) to see the full list of travel-related cases by county.

The total number of Zika Cases reported in Hillsborough County

Infection Type	Hillsborough County
Travel-Related Infections of Zika	34

Links:

[HAN398: CDC Updates Guidance for Pregnant Women and Women and Men of Reproductive Age for Zika Virus Infection Related to the Ongoing Investigation of Local Mosquito-borne Zika Virus Transmission in Miami-Dade County, Florida](#)



Week 45 Florida Flu Review

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

- **Influenza activity increased, but remains at low levels across the state.**
- **In week 45, emergency department (ED) and urgent care center (UCC) visits for ILI increased, but remain similar to levels seen in previous seasons at this time.**
- **In week 45, respiratory syncytial virus (RSV) activity in children <5 years old decreased slightly, but remains notably above levels observed in previous seasons at this time.**
 - For more information on RSV activity in Florida, see page 11.
- In week 44, the preliminary estimated number of deaths due to pneumonia and influenza (P&I) decreased and is below levels seen in previous seasons at this time.
- In week 45, all counties reported “mild” or no influenza activity.
- **No influenza-associated pediatric deaths were reported in week 45.**
 - No influenza-associated pediatric deaths have been reported so far this season.
 - **Annual vaccination remains the best way to protect children against influenza infection. Now is the perfect time to get your annual vaccine.**
- Thanksgiving is a time families get together; get vaccinated now so that next week you pass the turkey, not the flu!
- In week 45, no outbreaks of influenza or ILI were reported.
- **Since the start of the 2016-17 influenza season, the most common influenza subtype detected at the Bureau of Public Health Laboratories (BPHL) has been influenza A (H3).**

National influenza activity:

- **Influenza activity continues to circulate at low levels nationally. In recent weeks, influenza and ILI activity remained below the national baseline.**
 - While the timing and severity of influenza seasons vary and are unpredictable, flu activity is expected to increase in the coming weeks.
- **In recent weeks, influenza A (H3) has been the most common subtype reported to the Centers for Disease Control and Prevention (CDC) by public health laboratories across the nation.**
- For the 2016-17 season, CDC recommends use of inactivated influenza vaccines (IIV) or recombinant influenza vaccines (RIV). **Live attenuated influenza vaccines (LAIV) should not be used during the 2016-17 influenza season.** This recommendation follows poor or relatively lower effectiveness of LAIV between 2013 and 2016.
 - To learn more, please visit: http://www.cdc.gov/mmwr/volumes/65/rr/rr6505a1.htm?s_cid=rr6505a1_w.
- CDC recommends annual influenza vaccination for everyone aged six months and older. **People who have not been vaccinated against influenza should get vaccinated as soon as possible.**
 - Getting your annual flu vaccine aids in the protection of others who are more vulnerable to serious influenza complications, such as pregnant women, the elderly, young children, and people with chronic conditions like asthma or diabetes. Influenza can be more serious for these individuals and the best way to protect them is by getting your flu vaccine every year.
- There is increased risk for highly pathogenic avian influenza (HPAI) H5 virus identification in birds as we enter the fall migratory season. HPAI H5 has not been identified in Florida birds and would be expected to be seen in more northerly states first, but identifications are possible. To date, only one wild duck in Alaska has tested positive for HPAI H5 since November 2015. No human HPAI infections have been identified in Florida or other states.
 - To learn more about HPAI, please visit: www.floridahealth.gov/novelflu.

Reportable Disease Surveillance Data

Disease Category	Annual Totals			3 Year Average	Year-To-Date	
	2013	2014	2015**		Jan – Oct 15	Jan – Oct 16
Vaccine Preventable Diseases						
Diphtheria	0	0	0	0.00	0	0
Measles	0	0	0	0.00	0	0
Mumps	0	2	1	1.00	1	2
Pertussis	94	65	41	66.67	29	53
Poliomyelitis	0	0	0	0.00	0	0
Rubella	0	0	0	0.00	0	1
Smallpox	0	0	0	0.00	0	0
Tetanus	0	0	0	0.00	0	0
Varicella	65	59	74	66.00	62	60
CNS Diseases & Bacteremias						
Creutzfeldt-Jakob Disease	1	1	3	1.67	3	2
<i>H. influenzae</i> (Invasive Disease in children <5)	2	3	2	2.33	0	1
Listeriosis	5	2	2	3.00	2	0
Meningitis (Bacterial, Cryptococcal, Mycotic)	11	12	16	13.00	15	7
Meningococcal Disease	6	3	2	3.67	2	2
Staphylococcus aureus (VISA, VRSA)	1	0	0	0.33	0	0
<i>S. pneumoniae</i> (Invasive Disease in children <6)	8	5	3	5.33	0	0
Enteric Infections						
Campylobacteriosis	134	189	276	199.67	235	241
Cholera	0	0	0	0.00	0	0
Cryptosporidiosis	59	354	99	170.67	88	57
Cyclospora	9	4	1	4.67	0	0
Escherichia coli, Shiga toxin-producing (STEC)	30	19	28	25.67	25	34
Giardiasis	56	64	55	58.33	45	86
Hemolytic Uremic Syndrome	2	1	2	1.67	2	1
Salmonellosis	297	361	307	321.67	263	298
Shigellosis	63	68	239	123.33	232	70
Typhoid Fever	0	0	0	0.00	0	1
Viral Hepatitis						
Hepatitis A	10	5	5	6.67	0	0
Hepatitis B (Acute)	56	59	67	60.67	1	2
Hepatitis C (Acute)	38	29	47	38.00	29	53
Hepatitis +HBsAg in Pregnant Women	30	35	28	31.00	0	0
Hepatitis D, E, G	0	0	1	0.33	0	1

Reportable Disease Surveillance Data

Disease Category	Annual Totals			3 Year Average	Year-To-Date	
	2013	2014	2015**		Jan – Oct 15	Jan – Oct 16
Vectorborne, Zoonoses						
Chikungunya	N/A	34	9	N/A	10	1
Dengue	4	6	7	5.67	4	2
Eastern Equine Encephalitis	1	0	0	0.33	0	0
Ehrlichiosis/Anaplasmosis	2	2	0	1.33	0	0
Leptospirosis	0	0	1	0.33	1	0
Lyme Disease	12	11	16	13.00	12	7
Malaria	8	11	2	7.00	2	5
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	4	3	4.00	2	3
Rabies (Human)	0	0	0	0.00	296	251
Rocky Mountain Spotted Fever	1	0	0	0.33	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	0	0	2	0.67	2	0
Western Equine Encephalitis	0	0	0	0.00	0	0
Yellow Fever	0	0	0	0.00	0	0
Zika Fever	NA	NA	NA	NA	0	28
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	1
Glanders	0	0	0	0.00	0	0
Hansen's Disease (Leprosy)	2	0	0	0.67	0	0
Hantavirus Infection	0	0	0	0.00	0	0
Legionellosis	18	8	21	15.67	19	22
Melioidosis	0	0	0	0.00	0	0
Vibriosis	13	7	11	10.33	9	10

Reportable Disease Surveillance Data

Disease Category	Annual Totals			3 Year Average	Year-To-Date	
	2013	2014	2015**		Jan-Oct 2015	Jan-Oct 2016
Chemicals/Poisoning						
Arsenic	0	0	0	0.00	0	0
Carbon Monoxide	5	22	27	18.00	20	25
Lead	173	243	297	237.67	221	160
Mercury	0	0	13	4.33	0	0
Pesticide	13	39	38	30.00	0	8
Influenza						
Influenza, Pediatric Associated Mortality	1	1	0	0.67	0	0
Influenza, Novel or Pandemic Strain	0	0	0	0.00	0	0
HIV/AIDS*						
AIDS	216	180	197	197.67	144	146
HIV Infection	324	330	406	353.33	302	310
STDs						
Chlamydia	7913	7304	7490	7569.00	6179	6741
Gonorrhea	2031	1848	1996	1958.33	1635	1889
Syphilis, Congenital	4	4	3	3.67	3	1
Syphilis, Latent	156	166	183	168.33	138	159
Syphilis, Early	349	141	149	213.00	125	163
Syphilis, Infectious	334	208	227	256.33	185	186
Tuberculosis						
TB	53	49	41	47.67	33	36
Food and Waterborne Illness Outbreaks						
Food and Waterborne Cases	73	58	27	52.67	27	1
Food and Waterborne Outbreaks	4	3	2	3.00	2	1

Current HIV Infection data by year of report reflects any case meeting the CDC definition of 'HIV infection' which includes all newly reported HIV cases and newly reported AIDS cases with no previous report of HIV in Florida. If a case is later identified as being previously diagnosed and reported from another state, the case will no longer be reflected as a Florida case and the data will be adjusted accordingly. Data from the most recent calendar year (2015) are considered provisional and therefore should not be used to confirm or rule out an increase in newly reported cases in Florida. The final year-end numbers are generated in July of the following year, after duplicate cases are removed from the dataset, as is customary of HIV surveillance in the US..

** Includes confirmed and probable cases reported in Florida residents (regardless of where infection was acquired) by date reported to the Bureau of Epidemiology in Merlin. Data for 2015 and 2016 are provisional and subject to change. Counts are current as of the date above, but may change. Please note that counts presented in this table may differ from counts presented in other tables or reports, depending on the criteria used.

Changes in case definitions can result in dramatic changes in case counts. Please see Florida Surveillance Case Definitions on the Bureau of Epidemiology for information on case definition changes (<http://www.floridahealth.gov/diseases-and-conditions/disease-reporting-and-management/disease-reporting-and-surveillance/case-def-archive.html>).

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/chdecontact> 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/chdecontact>. 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