Sentinel Provider Influenza-Like Illness (ILI)¹ Surveillance Summary (health.state.tn.us/TNflu_report_archive.htm) for the Week of January 26-February 1, 2014 (Week 5)

| Summary for | # Sites reporting | Total Sites | Reg | otal ional Ll | Total Regional Patients | % ILI | Compared to State ² |
|-------------------------------|-------------------|----------------|-----|---------------------|-------------------------------|-------|---------------------------------------|
| Hamilton County (Chattanooga) | 3 | 4 | | 4 | 409 | | lower |
| East Tennessee Region | 8 | 8 | 1 | 67 | 2332 | 7.2% | higher |
| Jackson-Madison County | 2 | 2 | 2 | 22 | 632 | 3.5% | |
| Knoxville-Knox County | 4 | 4 | 5 | 52 | 1641 | 3.2% | |
| Mid-Cumberland Region | 6 | 10 | | 4 | 340 | 1.2% | lower |
| Shelby County (Memphis) | 1 | 5 | | 2 | 65 | 3.1% | |
| Nashville-Davidson County | 3 | 6 | | 7 | 453 | 1.6% | lower |
| Northeast Region | 3 | 3 | | 2 | 199 | 1.0% | |
| South Central Region | 3 | 3 | | 0 | 217 | 0.0% | lower |
| Southeast Region | 5 | 5 | 1 | 10 | 659 | 1.5% | lower |
| Sullivan County (Tri-Cities) | 2 | 2 | | 1 | 435 | 0.2% | lower |
| Upper Cumberland Region | 4 | 4 | | 5 | 576 | 0.9% | |
| West Tennessee Region | 6 | 6 | | 2 | 370 | 0.5% | lower |
| State of Tennessee | 50 | 62 | 2 | 78 | 8328 | 3.34% | · · · · · · · · · · · · · · · · · · · |

The percentage of patients with ILI reported in Week 5 was 3.34% as compared to 4.25% in Week 4. To date, 112 specimens from Week 5 were tested; 14 (12.5%) were positive for influenza, all A(H1N1).

Not too late to get vaccinated

Though the data shows H1N1 prevalence declining, activity of the virus is still above epidemic levels and mid-season rises in other flu strains are still possible. People can still benefit from getting vaccinated; the match between vaccine strains and the circulating strains of H1N1, H3N2 and B type influenza viruses is very good. Vaccine is the first and most important step in protecting against flu and its potentially serious complications.

Higher proportion of flu hospitalizations among young

Overall influenza activity to date is lower than the 2012-2013 season. However, CDC reports that 61% of laboratory-confirmed flu-associated hospitalizations in the US have been among persons aged 18-64 years. Typically, most flu-related hospitalizations (50-60%) are in persons older than 64. This pattern is similar to the 2009-2010 season when this season's dominant H1N1 strain first emerged.

Sentinel Providers - Use Current (9/13) Specimen Form If you have questions, contact your regional or state SPN representative.

People who are still unvaccinated are at the highest risk of contracting influenza; it is not too late to benefit from influenza vaccination. Vaccine takes about 2 weeks to work: do not delay. Persons, including pregnant women, at high risk of complications from influenza infection who develop influenza symptoms should consult their healthcare provider promptly and take antiviral medication, if prescribed.

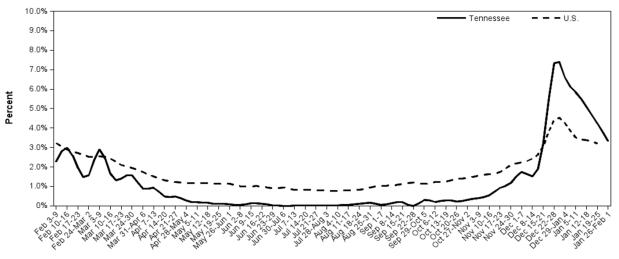
Respiratory Viral Panel

Number of Positive Specimens, by week

| Month/Week | # | Flu A (H1N1) | Flu A (H3) | RSV A | RSV B | Paraflu 1 | Rhino | Meta- pneumo | Adeno B | Adeno C | Adeno E | Corona OC43 | Corona NL63 | Corona 229E | Corona HKU1 |
|------------|-----|-----------------|------------|-------|-------|-----------|-------|-----------------|---------|---------|---------|----------------|----------------|----------------|----------------|
| January | | | | | | | | | | | | | | | |
| Current | 112 | 14 | 0 | 2 | 1 | 0 | 3 | 1 | 0 | 1 | 0 | 2 | 0 | 0 | 3 |
| 4 | 165 | 28 | 0 | 3 | 8 | 2 | 8 | 3 | 2 | 0 | 2 | 7 | 1 | 0 | 4 |
| 3 | 211 | 48 | 0 | 4 | 13 | 3 | 5 | 3 | 4 | 2 | 0 | 8 | 2 | 0 | 4 |
| 2 | 255 | 77 | 0 | 2 | 12 | 1 | 17 | 4 | 1 | 2 | 2 | 4 | 0 | 1 | 9 |
| 1 | 198 | 61 | 2 | 7 | 11 | 2 | 16 | 1 | 0 | 2 | 0 | 2 | 0 | 0 | 2 |
| December | | | | | | | | | | | | | | | |
| 52 | 211 | 78 | 0 | 6 | 11 | 2 | 16 | 3 | 1 | 3 | 0 | 2 | 1 | 0 | 4 |

Percentage of Outpatient Visits Reported by the U.S. and Tennessee Outpatient Influenza-like Illness Surveillance Network (ILINet) as Influenza-like Illness, 2013-2014

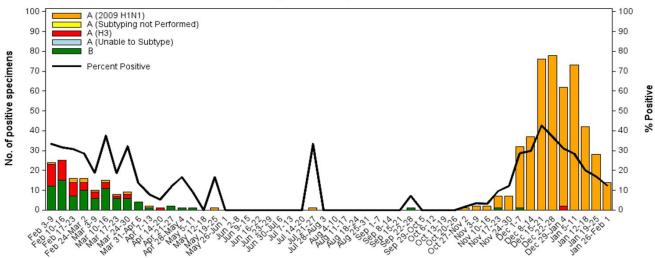
Updated: February 7, 2014



Week (February 3, 2013 - February 1, 2014)

Influenza Positive Tests Submitted to TN Dept. of Health Laboratory Services Tennessee, 2013-2014

Updated: February 7, 2014

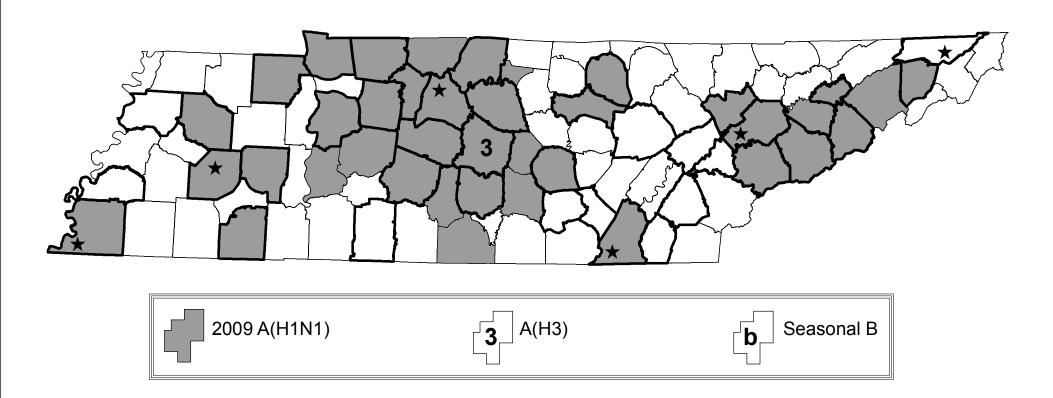


Week (February 3, 2013 - February 1, 2014)

Influenza Confirmed by Culture or PCR in Tennessee from Specimens Collected by Any Source within the Past 6 Weeks

December 22, 2013 to February 1, 2014

- Strains are reported by county of case residence.
- Counties where influenza sentinel providers are located are identified with bold boundary lines.
- Stars mark counties with large metropolitan populations (Memphis, Jackson, Nashville, Chattanooga, Knoxville, and the Tri-Cities area).



Reference Information for Sentinel Provider Network

1 Influenza-like illness (ILI) is defined as fever > 100°F (37.8°C) plus cough and/or sore throat, in the absence of a known cause (other than influenza). Classification of ILI is based upon symptoms only and does not require any test.

2 The % of patients with ILI seen in each region is compared to the statewide average. Regions with % statistically-significantly different from the state average are noted as "higher" or "lower." The CDC reports that the percentage of patients visiting outpatient healthcare providers in the Sentinel Provider Network (SPN) with influenza-like-illness (ILI) when influenza viruses are not circulating is expected to fall at or below a specific SPN baseline [nationwide = 2.2%, East South Central region (AL, TN, MS, KY) = 2.3%]. When the percentage of patients with ILI exceeds this baseline, this suggests that influenza viruses may be circulating.

Important information for Sentinel Providers

Sentinel Providers report ILI by the end of Tuesday following the end of the reporting week (www2a.cdc.gov/ilinet) and collect and ship specimens from ILI cases Monday through Thursday (maximum 10/week per provider). All Sentinel Provider specimens MUST be accompanied by the Influenza and Respiratory Viral Panel Submission form or testing will not be done. The Respiratory Viral Panel is only validated for nasopharyngeal (NP) specimens. Specimens collected from other sites cannot be tested.

Additional laboratory supplies can be obtained by completing the lab order supply form. To ensure the order is filled, please include the CDC Provider ID Code.

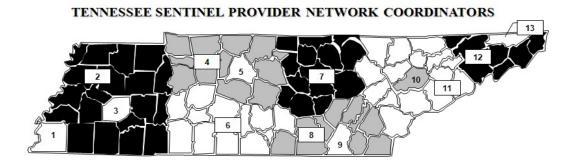
Contact Information

Submit weekly reports to: http://www2a.cdc.gov/ilinet/ OR Fax 888-232-1322

State Lab: Susan McCool 615-262-6351

SPN Questions:

State: Robb Garman 800-404-3006 OR 615-741-7247 County/Region: Regional SPN Coordinator (see map)



| 1 | Shelby County | 901-222-9239 |
|----|-----------------------------|--------------|
| 2 | West TN Region | 731-421-6758 |
| 3 | Jackson-Madison County | 731-927-8540 |
| 4 | Mid-Cumberland Region | 615-650-7000 |
| 5 | Nashville-Davidson County | 615-340-0551 |
| 6 | South Central Region | 931-380-2532 |
| 7 | Upper Cumberland Region | 931-646-7505 |
| 8 | Southeast Region | 423-634-6065 |
| 9 | Chattanooga-Hamilton County | 423-209-8063 |
| 10 | Knoxville-Knox County | 865-215-5084 |
| 11 | East TN Region | 865-549-5287 |
| 12 | Northeast Region | 423-979-3200 |
| 13 | Sullivan County | 423-279-7545 |