Sentinel Provider Influenza-Like Illness (ILI)¹ Surveillance Summary (health.state.tn.us/TNflu_report_archive.htm) for the Week of December 22-28, 2013 (Week 52)

Corrected 01/17/14

Summary for	# Sites reporting	Total Sites	Total Regional ILI	Total Regional Patients	% ILI	Compared to State ²
Hamilton County (Chattanooga)	4	4	5	365	1.4%	lower
East Tennessee Region	5	8	53	967	5.5%	higher
Jackson-Madison County	1	2	23	274	8.4%	higher
Knoxville-Knox County	3	4	12	359	3.3%	
Mid-Cumberland Region	5	10	10	152	6.6%	
Shelby County (Memphis)	0	5	0	0		n/a
Nashville-Davidson County	1	6	0	10	0.0%	
Northeast Region	3	3	0	78	0.0%	
South Central Region	2	3	1	98	1.0%	
Southeast Region	4	5	0	71	0.0%	
Sullivan County (Tri-Cities)	2	2	1	195	0.5%	lower
Upper Cumberland Region	3	4	 2	126	1.6%	
West Tennessee Region	6	6	0	162	0.0%	lower
State of Tennessee	39	62	107	2857	3.75%	

The percentage of patients with ILI reported in Week 52 was 3.75% as compared to 2.62% in Week 51. To date, 59 specimens from Week 51 have been tested; 26 (44.1%) were positive for influenza virus type A (H1N1). Nationally, the CDC reports influenza is currently most active in the Southeastern US, with type A (H1N1) as the predominant strain.

Severe pH1N1-associated illness among adults

From Nov-Dec. 2013, CDC has received a number of reports of severe respiratory illness among young and middle-aged adults, many of whom were infected with influenza A (H1N1) pdm09 (pH1N1) virus. For the 2013-14 season, if pH1N1 virus continues to circulate widely, illness that disproportionately affects young and middle-aged adults may occur. The full CDC Health Advisory can be found at http://emergency.cdc.gov/HAN/han00359.asp.

H7N9 in China:

No change from week 51.

Novel H3N2v Influenza in the Midwest:

No change from week 51.

For Sentinel Providers - Use Current Specimen Form:

Sentinel Providers are reminded to submit a specimen for every patient meeting the ILI case definition (up to 10 per week). It is important to use the current TDH specimen submission form <u>dated September 2013</u>. If you have questions, contact your

Strains currently circulating are a match for this season's vaccine. 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. Increased seasonal influenza activity may be seen over the next several weeks, up to 3 months or more. 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

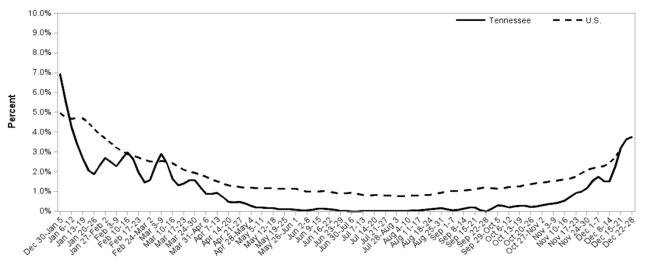
Number of Positive Specimens, by week*

Month/Week	#	Flu A (H1N1)	Flu B	RSV A	RSV B	Paraflu 1	Paraflu 3	Paraflu 4	Rhino	Metapne umo	Adeno B	Adeno C	Adeno E	Corona OC43	Corona NL63	Corona HKU1
December																
Current	59	26	0	2	3	0	0	0	3	2	0	0	0	0	0	0
51	168	68	0	1	9	1	0	0	12	0	0	0	0	1	0	0
50	124	37	0	3	6	0	0	0	10	1	1	2	0	0	1	2
49	112	31	1	1	8	3	0	1	10	0	0	1	0	1	0	1
November																
48	58	7	0	2	3	1	1	0	4	0	1	0	1	0	0	0
47	73	6	1	2	2	2	1	0	9	0	0	0	1	0	0	0

*Correction of Sentinel Provider Report Laboratory Data: A system error was identified that misclassified some specimens resulted as Type A(H1N1) by the Tennessee Public Health Laboratory as Type A(H3) in this weekly report. The table has been corrected: there were zero A(H3) specimens in December 2013.

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

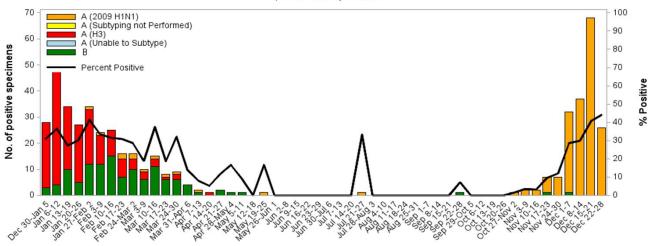
Updated: January 17, 2014



Week (December 30, 2012 - December 28, 2013)

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

Updated: January 17, 2014

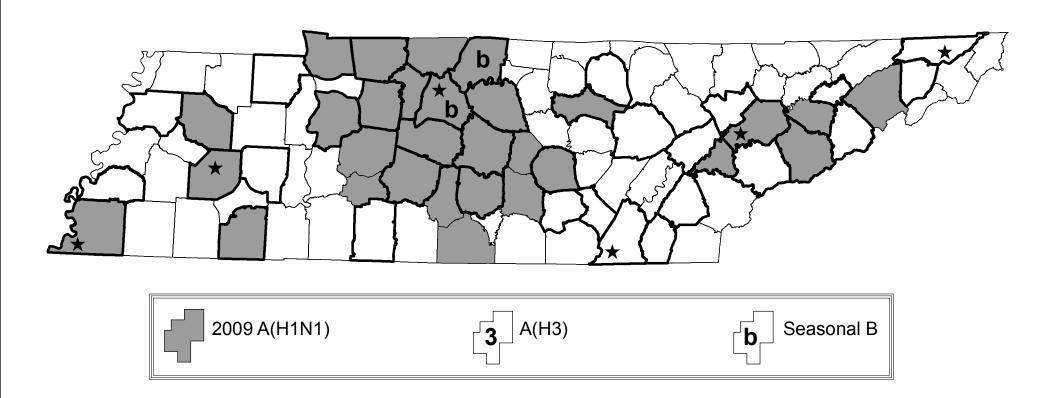


Week (December 30, 2012 - December 28, 2013)

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

November 17 through December 28, 2013

- 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.

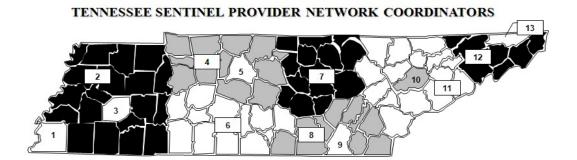
Contact Information

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