



EpiTimes Volume 8 Issue 4

Hepatitis A Vaccine Availability at the Pasco County Health Department

The Florida Department of Health-Pasco County has always recommended the general public get their Hepatitis A and Hepatitis B vaccines, as they are very effective and provide lifelong immunity. The Health Department offers free vaccines to persons who are a known contact of someone infectious with Hepatitis A. Free vaccines are also available for high-risk populations such as jail inmates, persons who use recreational drugs (both injection and non injection), or persons experiencing homelessness. Persons who are uninsured or underinsured can call us and come in for the Hepatitis A vaccine and only pay a \$15.00 injection fee. The collection of this fee is based on ability to pay and risk factors.

For persons with insurance, Hepatitis A vaccine can be obtained at a local CVS, Walgreens, Walmart, Publix Pharmacy, and other retail pharmacies. Some private providers also offer vaccine in their offices. It is recommended that you call beforehand to check vaccine availability.

The Health Department also offers free Hepatitis A vaccines to children through the Vaccines for Children program.

For more information call Denise at 813-364-5812.

CDC: 2019 Pink Book Webinar Series

CDC is offering a weekly series of 15 one-hour webinars that will provide an overview of vaccination principles, general recommendations, immunization strategies, and specific information about vaccine-preventable diseases and the vaccines that prevent them. Each webinar will explore a chapter from the 13th edition of *Epidemiology and Prevention of Vaccine-Preventable Diseases* (the "Pink Book") and will also include updated information from recent Advisory Committee on Immunization Practices (ACIP) meetings and votes. The webinars start on June 5, 2019, and will air live most Wednesdays from 12–1 p.m. EDT through September 25, 2019. Please visit <https://www2.cdc.gov/vaccines/ed/pinkbook/> for the schedule and additional information. Continuing Education (CE) will be available for each event.

Florida Department of Health Pasco County

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(727) 861-5260

www.pasco.floridahealth.gov

Administrator:
Mike Napier, MS

Epidemiology Manager:
Garik Nicholson, MPH, CIC

Office Hours:
Mon-Fri 8am–5pm

To report a disease, disease outbreak or request information call:

Epidemiology: (352) 521-1450, Option 2

Confidential fax: (352) 521-1435

TB: (727) 861-5260, ext. 0253
Confidential fax: (727) 861-4844

Environmental: (727) 841-4425, Option 5

Animal Control (report animal bites): (727) 834-3216
Fax: (813) 929-1218

STD/HIV: (727) 484-3655 (W. Pasco) or (352) 834-6150 (E. Pasco)

HIV (testing): (727) 619-0260 (W. Pasco) or (352) 834-6146 (E. Pasco)

After Hours:
Pager (727) 257-1177
Answering Service (866) 568-0119

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Reporting of Possible Rabies Exposures and Rabies Post Exposure Prophylaxis

All bites and scratches must be reported to Pasco County Animal Services (regardless of vaccination status, owned/stray, provoked/unprovoked, etc.).

When a rabies exposure has occurred, PEP is indicated regardless of the exposure date, provided the clinical signs of rabies are **not present**. Individuals started on Rabies PEP must be reported to the Health Department for timely follow up. It is extremely important for individuals to **adhere to the vaccination schedule**. Patients often do not read their discharge paperwork reminding them of follow-up doses. Our goal, once notified by you, is to contact these patients before they fall out of compliance.

There are always questions about our role in treatment at the Health Department. We provide vaccines at the Health Department. We are able to see uninsured patients and apply for patient assistance through the manufacturer (you are also able to apply for patient assistance). Unfortunately, we are out of network for most insurance companies. In that instance, we let the patient make the decision to come to us or follow up with the hospital depending on whatever is cheapest or most convenient for them. We are not open on the weekends and holidays, so follow up vaccines that fall during these times must be given at the hospital.

Vaccine is given on Days 0, 3, 7, and 14 for immunocompetent patients. Vaccine is give on Days 0, 3, 7, 14 & 28 + follow-up titer for immunocompromised patients.

Neither vaccine nor HRIG should be given in the gluteals. HRIG should only be given in the gluteal if the bite occurred there. According to CDC, the only acceptable sites for intramuscular injections are in the deltoid muscle and anterolateral thigh.

If anatomically feasible, the full dose of HRIG is infiltrated around and into any wounds. Any remaining volume is injected intramuscularly at a site distant from vaccine administration. **HRIG is not administered in the same syringe or at the same anatomic site as the first vaccine dose.** However, subsequent doses (i.e., on days 3, 7, and 14) of vaccine in the 4-dose vaccine series can be administered in the same anatomic location in which HRIG was administered.

From Code of Ordinances, Pasco County
Sec. 14-78. - Reporting animal bites.

(a)

It shall be the duty of any person bitten, having knowledge of, or treating any person bitten by any animal to report the fact of such bite within one working day to the department. It shall be the duty of any person knowing of or treating any animal bitten by another animal having or suspected of having rabies to report the fact of such bite within one working day to the department.

(Ord. No. 16-29, § 3, 10-11-16)

From Florida Statute 64D-3

(14) "Exposure to Rabies" – Any bite, scratch or other situation in which saliva or nervous tissue of a potentially rabid animal enters an open or fresh wound, or comes in contact with mucous membranes by entering the eye, mouth or nose of another animal or person.

Patient assistance:

Imovax (Sanofi, Rabies vaccine) and Imogam (Sanofi, Rabies immune globulin)

http://www.sanofi-patient-connection.com/media/pdf/SPC_Application_2016.pdf

RabAvert (GSK, Rabies vaccine) Provider must enroll in program first.

<https://www.gskforyou.com/vaccines-patient-assistance/enrollment/>

<https://www.gskforyou.com/pdf/GSK-Patient-Assistance-Program.pdf>



As always, if you or a clinician have any question about whether to start PEP, do not hesitate to give us a call. We are here 8a-5p Monday through Friday. Our on-call pager number is (727) 257-1177 and after-hours answering service number is (866) 568-0119.

Influenza Update

In week 18, ILI activity decreased and was similar to levels observed at this time in previous seasons. Activity has peaked for the season; however, influenza continues to circulate at low levels in Florida.

The timing of peak activity this season varied across regions, ranging from as early as week 52 (ending December 29, 2018) to as late as week 9 (ending March 2, 2019). For more information on regional trends, see page 8.

Nearly all of Florida's counties reported no influenza activity or mild influenza activity in week 18.

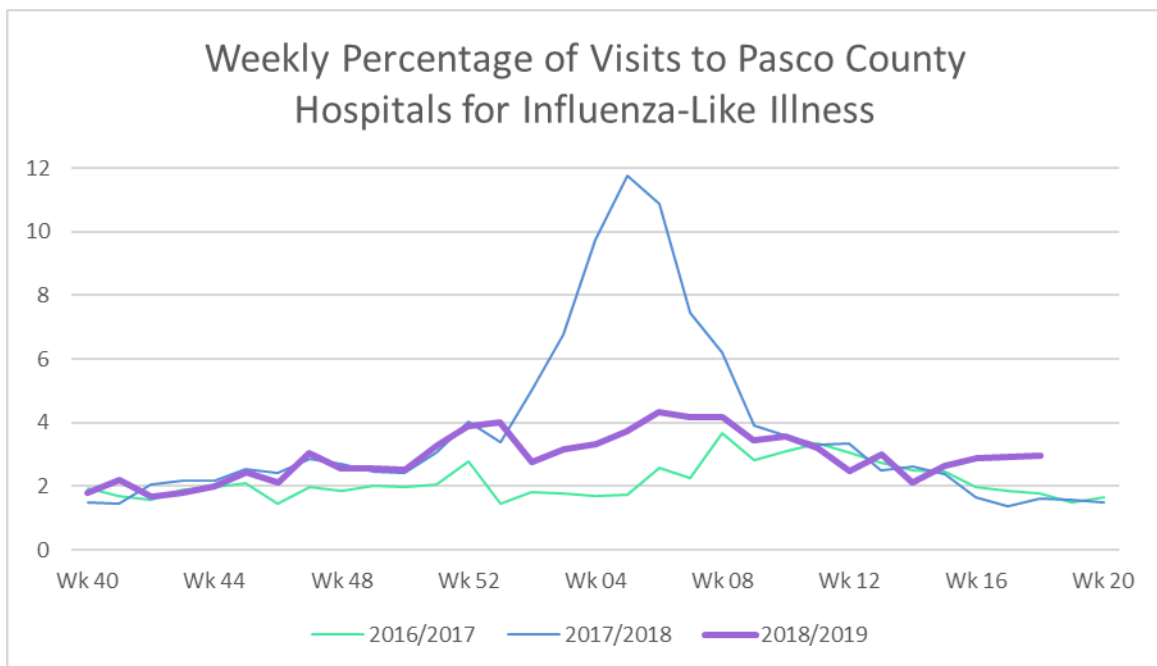
In week 18, two respiratory outbreaks were reported. A total of 229 respiratory outbreaks have been reported since the season began on September 30, 2018.

No new influenza-associated pediatric deaths were reported in week 18. As of week 18, four influenza-associated pediatric deaths have been reported so far this season, all in unvaccinated children. For more information, see page 10.

In addition to getting vaccinated each influenza season, the Florida Department of Health recommends you take everyday precautions to prevent the spread of influenza and other respiratory viruses:

- Wash your hands often with soap and water (if soap is not available, use an alcohol-based sanitizer).
- Avoid touching your eyes, nose, and mouth.
- If you do get sick, stay home until fever-free for at least 24 hours (without the use of fever-reducing medication).

On March 28, 2019, the Centers for Disease Control and Prevention (CDC) released an official health advisory reminding clinicians to have high suspicion for influenza and to prescribe antiviral treatment to high-risk patients with suspected influenza. Antiviral treatment should be started as soon as possible after illness onset and should not wait for laboratory confirmation. Early treatment should not be delayed for hospitalized and high-risk patients, especially those aged 65 years and older. For more information, please visit: [emergency.cdc.gov/han/han00419.asp](https://www.emergency.cdc.gov/han/han00419.asp).



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Florida Arbovirus Surveillance

WNV activity: No human cases of WNV infection were reported this week. No horses with WNV infection were reported this week. No sentinel chickens tested positive for antibodies to WNV this week in. In 2019, one horse and 12 sentinel chickens have been reported from eight counties.

SLEV activity: No human cases of SLEV infection were reported this week. No sentinel chickens tested positive for antibodies to SLEV this week. In 2019, no positive samples have been reported.

EEEV activity: No human cases of EEEV infection were reported this week. No horses with EEEV infection were reported this week. One sentinel chicken tested positive for antibodies to EEEV this week in Citrus County. In 2019, eight horses, one emu, and 25 sentinel chickens have been reported from 12 counties.

International Travel-Associated Dengue Fever Cases: Two cases of dengue fever were reported this week in persons that had international travel. In 2019, 25 travel-associated cases have been reported.

Dengue Fever Cases Acquired in Florida: No cases of locally acquired dengue fever were reported this week. In 2019, no cases of locally acquired dengue fever have been reported.

International Travel-Associated Chikungunya Fever Cases: No cases of chikungunya fever were reported this week in persons that had international travel. In 2019, two travel-associated cases have been reported.

Chikungunya Fever Cases Acquired in Florida: No cases of locally acquired chikungunya fever were reported this week. In 2019, no cases of locally acquired chikungunya fever have been reported.

International Travel-Associated Zika Fever Cases: No cases of Zika fever were reported this week in persons that had international travel. In 2019, 15 travel-associated cases have been reported.

Zika Fever Cases Acquired in Florida: No cases of locally acquired Zika fever were reported this week. In 2019, no cases of locally acquired Zika fever have been reported.

Advisories/Alerts: Bay, Calhoun, and Walton counties are currently under a mosquito-borne illness advisory. No other counties are currently under mosquito-borne illness advisory or alert.

There are no areas of ongoing, active Zika transmission in Florida. For additional information on current CDC recommendations, please visit www.cdc.gov/zika/intheus/florida-update.html. For additional information on Zika virus cases from 2016–2018, including up-to-date numbers, please visit <https://zikafreefl.org/>.

There are Level 2 Travel Health Notices for Brazil and Nigeria related to the transmission of yellow fever virus. Additional information on travel health notices can be found at the following link: wwwnc.cdc.gov/travel/notices. For a map of arboviral disease activity in the United States, please visit the following link: wwwnc.cdc.gov/arbonet/maps/ADB_Diseases_Map/index.html.



Epidemiology Disease Summary	April		YTD	
	2019	2018	2019	2018
CNS Diseases and Bacteremias				
Creutzfeldt-Jacob Disease (CJD)	-	-	-	-
Haemophilus influenzae	3	1	5	4
Legionellosis	-	1	3	2
Meningitis, Bacterial or Mycotic	-	1	-	1
Meningococcal Disease	-	-	-	-
S. aureus Infection, Intermediate Resistance to Vancomycin (VISA)	-	-	-	-
Strep pneumoniae Invasive Disease, Drug-Resistant	1	-	3	1
Strep pneumoniae Invasive Disease, Drug-Susceptible	2	2	8	4
Enteric Infections				
Campylobacteriosis	12	17	45	43
Cholera (Vibrio cholerae Type O1)	-	-	-	-
Cryptosporidiosis	1	1	6	3
Cyclosporiasis	-	-	-	-
Escherichia coli Shiga Toxin-Producing (STEC)	1	2	3	7
Giardiasis	3	-	6	5
Hemolytic Uremic Syndrome (HUS)	-	-	-	-
Listeriosis	-	-	-	1
Salmonella Typhi Infection	1	1	3	3
Salmonellosis	5	6	30	25
Shigellosis	-	4	1	8
Vaccine Preventable Diseases				
Measles	-	-	-	-
Mumps	-	-	-	1
Pertussis	2	1	5	3
Varicella	-	-	5	6
Vector Borne, Zoonoses				
Babesiosis	-	-	-	-
Brucellosis	-	-	-	-
Chikungunya Fever	-	-	-	-
Eastern Equine Encephalitis Neuroinvasive Disease	-	-	-	-
Ehrlichiosis/Anaplasmosis	-	-	-	-
Herpes B Virus, Possible Exposure	-	1	-	2
Lyme Disease	-	2	-	3
Malaria	-	-	1	-
Rabies, Animal	-	-	1	-
Rabies, Possible Exposure	24	20	77	77
Rocky Mountain Spotted Fever and Rickettsiosis	-	-	-	-
West Nile Virus Neuroinvasive Disease	-	-	-	-
Zika Virus Disease and Infection	-	-	-	1
Viral Hepatitis				
Hepatitis A	61	4	207	15
Hepatitis B, Acute	6	1	30	14
Hepatitis B, Chronic	16	8	53	37
Hepatitis B, Perinatal	-	-	-	-
Hepatitis B, Pregnant Women	1	-	4	4
Hepatitis C, Acute	8	-	19	6
Hepatitis C, Chronic	69	68	262	306
Hepatitis C, Perinatal	-	1	-	2
Hepatitis D	-	-	1	2
Other				
Carbon Monoxide Poisoning	-	-	4	1
Hansen's Disease (Leprosy)	-	-	-	-
Influenza-Associated Pediatric Mortality	-	-	1	-
Lead Poisoning	5	17	16	42
Mercury Poisoning	-	-	-	-
Pesticide-Related Illness and Injury	-	-	-	-
Scombroid Poisoning	1	-	2	-
Virbiosis	2	-	3	-
Total	224	159	804	629

STD Morbidity Statistics

- 142 Chlamydia cases worked
- 48 Gonorrhea cases worked
- 7 Syphilis cases worked
- 1 HIV cases worked

Most people who have chlamydia have no symptoms. If you do have symptoms, they may not appear until several weeks after you have sex with an infected partner. Even when chlamydia causes no symptoms, it can damage your reproductive system.

HIV Outreach Statistics

- 84 individuals were tested for HIV
- 54 rapid Hepatitis tests performed



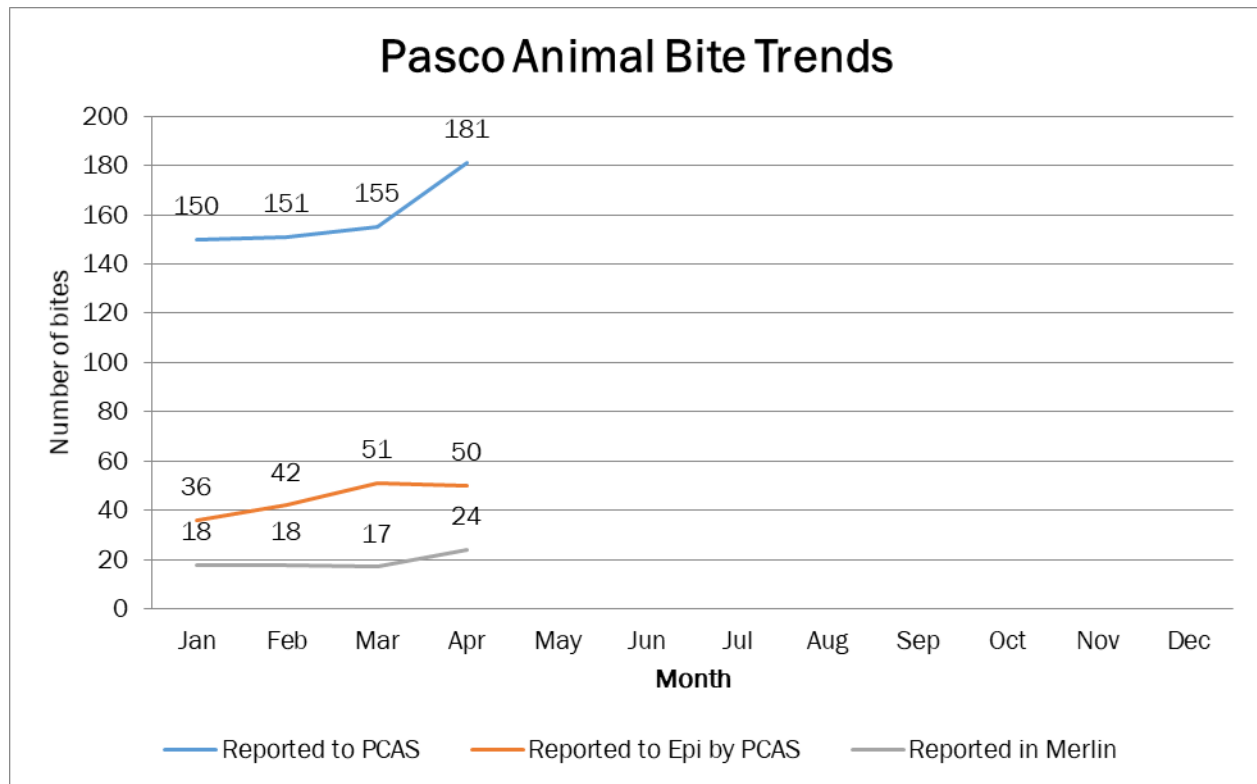
Jail Linkage Statistics

- 51 rapid HIV tests performed (0 positive)
- 25 Hepatitis tests performed (3 positive)
- 51 individuals were HIV post-test counseled



Animal Bites

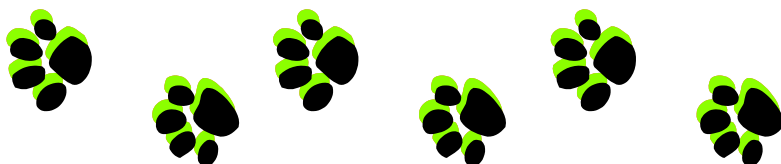
- Pasco County Animal Services (PCAS) received 181 animal bites in April
- PCAS reported 50 of 181 (28%) cases to PCHD for follow-up
- 24 of 50 (48%) were reported in Merlin after meeting case definition
- DOH – Pasco sent 7 animal specimens for rabies testing (0 positive)



Reported to PCAS = Animal exposures reported to PCAS by community or Epi.

Reported to Epi by PCAS = Exposures that require Epi’s attention due to the severity of bite, type of animal, inability to locate animal, victim and/or owner and need for rabies prophylaxis.

Reported in Merlin = Involves situations where the animal or person could not be located or exposure victim either accepts or declines rabies vaccinations.





Florida Department of Health Pasco County



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Staff News and Upcoming Events

Free Hepatitis A and Hepatitis B vaccines to high risk groups

The Florida Department of Health-Pasco County is offering free hepatitis vaccines to those in high risk groups such as recreational drug users, those experiencing homelessness, and those with direct contact with others who have hepatitis A. For more information call Denise at 813-364-5812.

Free Test Fridays

The Florida Department of Health-Pasco County is offering Free Test Fridays. For more information, contact Rob at 727-619-0260.

Pasco Public Defender Mobile Medical Unit

The Florida Department of Health-Pasco County is partnering with the Pasco Public Defender Mobile Medical Unit to provide free rapid HIV and Hepatitis C testing. The Mobile Medical Unit offers free basic medical care for uninsured, free health screenings for all ages, and free flu shots. No appointment is needed. For more information, please call 352-521-1450, option 1 or visit their website, where you can also find a calendar with all of their stops for the month.

Resources

Florida Health Alert Network

Everbridge is a public health notification system that allows us to disseminate pertinent public health information regarding outbreaks or disease trends more efficiently. Everbridge provides users with a wide range of methods to receive information on a variety of communication devices. To register, please visit <https://www.surveymonkey.com/r/SD3R5ON>

Hepatitis C Consultation Service

The Clinician Consultation Center (CCC) provides no-cost, up-to-date, expert clinical advice to support clinicians managing patients with hepatitis C (HCV) and co-morbidities such as HIV co-infection or substance use disorder. Advice provided is based on federal treatment guidelines, current medical literature, and clinical best practices. Consultation topics include: HCV transmission & prevention, HCV screening & diagnostic testing, HCV staging & monitoring, regimen selection & dosing, drug interactions, HIV/HCV management strategies, prior HCV treatment failure, ESRD/chronic kidney disease, HCV in pregnancy, and management of clinical problems— including cirrhosis and anemia.

Call for a Phone Consultation

(844) HEP-INFO or (844) 437-4636
Monday-Friday, 9 a.m.—8 p.m. EST

Submit a Case for Consultation Online

For non-urgent HCV management consultation
nccc.ucsf.edu

Reportable Diseases/Conditions in Florida

Practitioner List (Laboratory Requirements Differ)



Per Rule 64D 3.029, Florida Administrative Code, promulgated October 20, 2016

Florida Department of Health

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

- ! 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
- + Acquired immune deficiency syndrome (AIDS)
- 📞 Amebic encephalitis
- ! Anthrax
 - Arsenic poisoning
- ! Arboviral diseases not otherwise listed
 - Babesiosis
- ! Botulism, foodborne, wound, and unspecified
 - Botulism, infant
- ! Brucellosis
 - California serogroup virus disease
 - Campylobacteriosis
- + Cancer, excluding non-melanoma skin cancer and including benign and borderline intracranial and CNS tumors
 - Carbon monoxide poisoning
 - Chancroid
 - Chikungunya fever
- 📞 Chikungunya fever, locally acquired
 - Chlamydia
- ! Cholera (*Vibrio cholerae* type O1)
 - Ciguatera fish poisoning
- + Congenital anomalies
 - Conjunctivitis in neonates <14 days old
 - Creutzfeldt-Jakob disease (CJD)
 - Cryptosporidiosis
 - Cyclosporiasis
- ! Dengue fever
- ! Diphtheria
 - Eastern equine encephalitis
 - Ehrlichiosis/anaplasmosis
 - *Escherichia coli* infection, Shiga toxin-producing
 - Giardiasis, acute
- ! Glanders
 - Gonorrhoea
 - Granuloma inguinale

- ! *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 and children <2 years old
- 📞 Herpes B virus, possible exposure
 - 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 immunodeficiency virus (HIV) infection
 - HIV-exposed infants <18 months old born to an HIV-infected woman
 - Human papillomavirus (HPV)-associated laryngeal papillomas or recurrent respiratory papillomatosis in children <6 years old; anogenital papillomas in children ≤12 years old
- ! Influenza A, novel or pandemic strains
- 📞 Influenza-associated pediatric mortality in children <18 years old
 - Lead poisoning (blood lead level ≥5 µg/dL)
 - Legionellosis
 - Leptospirosis
- 📞 Listeriosis
 - Lyme disease
 - Lymphogranuloma venereum (LGV)
 - Malaria
- ! Measles (rubeola)
- ! Melioidosis
 - Meningitis, bacterial or mycotic
- ! Meningococcal disease
 - Mercury poisoning
 - Mumps
- + Neonatal abstinence syndrome (NAS)
- 📞 Neurotoxic shellfish poisoning
- 📞 Paratyphoid fever (*Salmonella* serotypes Paratyphi A, Paratyphi B, and Paratyphi C)
- 📞 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
 - Syphilis
- 📞 Syphilis in pregnant women and neonates
 - Tetanus
 - Trichinellosis (trichinosis)
 - Tuberculosis (TB)
- ! 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
- ! Zika fever

Coming soon: "What's Reportable?" app for iOS and Android

*Subsection 381.0031(2), Florida Statutes, 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, subsection 381.0031(4), Florida Statutes, 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...