

EpiTimes Volume 6 Issue 4

2015 Florida Morbidity Statistics Report

Dear Colleagues:

The 2015 Florida Morbidity Statistics Report is now available. This document is the annual comprehensive report for all reportable disease morbidity in Florida and this edition marks the 60th publication since 1945. The report contains the official statistics, in tabular and graphic form, for the reported occurrence of reportable diseases and conditions in Florida. Unless otherwise noted, the data are final totals for the corresponding year. This report directly supports the mission of the department by identifying patterns and trends in the incidence of disease that are used as the scientific basis for development of disease control and prevention strategies and polices.

The 2015 report contains contributions from over 85 employees who participated in the writing and production of the report. This team included representatives from county health departments (CHDs) and other program areas within the Florida Department of Health, including the Immunization, HIV/AIDS, Sexually Transmitted Diseases and Viral Hepatitis, and Tuberculosis Control sections. Thank you so much to those who submitted papers and outbreaks for inclusion in the report! We also thank the staff in each county health department who diligently collect the very important case data on which this report is based. The cases reported in this document drive disease prevention and intervention efforts in Florida.

An electronic version of the full report is available online at <u>www.Floridahealth.gov/</u> <u>MorbidityStatisticsReport</u>.

Hard copies of the report will be distributed to CHDs at the 2017 Statewide Epidemiology Training & Workshop Meeting in June. We will also be distributing copies to statewide partners, including professional societies and public health programs. If you have questions about the report or its distribution, please contact the Bureau of Epidemiology.

Thank you so much for your support of disease control efforts and we look forward to working with you on the 2016 Annual Morbidity Statistics Report!

Sincerely,

Dr. Russ Eggert

Russell W. Eggert, MD, MPH, FACPM, FAAFP Chief, Bureau of Epidemiology Division of Disease Control & Health Protection Florida Department of Health Florida Department of Health Pasco County Main Office 10841 Little Road New Port Richey, FL 34654

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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: (813) 558-5173

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)

<mark>After Hours:</mark> Pager (727) 257-1177 Answering Service (727) 815-4088

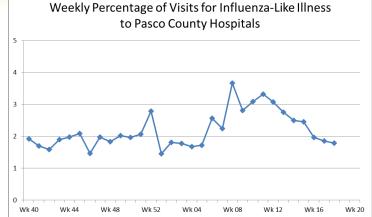
Epi Times editor: Jennie Pell, MPH, CPH, CIC Epidemiologist (352) 521-1450, ext. 6145 jennie.pell@flhealth.gov

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

- Florida reported local activity to the Centers of Disease Control and Prevention (CDC) in week 17.
- The influenza season is coming to a close. Influenza and ILI activity levels statewide have nearly returned to pre-season baselines.



- In week 17, influenza activity in Florida decreased.
 Statewide, influenza activity this season peaked in week 8 (late February). Influenza activity in South Florida peaked earlier than the rest of the state in week 52 (late December).
- Statewide, the percent of emergency department (ED) and urgent care center (UCC) visits for ILI decreased and was similar to levels observed in previous seasons at this time.
- Respiratory syncytial virus (RSV) activity in children <5 years old remained the same and was above levels observed in previous seasons at this time (see page 12).
- In week 16, the preliminary estimated number of deaths due to pneumonia and influenza (P&I) decreased and was below levels seen in previous seasons at this time.
- In week 17, one influenza-associated pediatric death was reported.
 - Ten influenza-associated pediatric deaths have been reported so far this season in Florida. This is the largest number of deaths to be reported since the 2012-13 season. Years in which influenza A (H3) viruses predominate have been associated with more severe illness, particularly in young children. While rare, Florida receives reports of influenza-associated pediatric deaths each season.
- Five counties reported moderate influenza activity, 52 counties reported mild influenza activity, and 10 counties reported no
 influenza activity.
- Two outbreaks of influenza or ILI were reported. A total of 147 outbreaks of influenza or ILI have been reported so far this season. This is the largest number of outbreaks reported in the last seven seasons.
- Since the start of the 2016-17 influenza season, the most common influenza subtype detected at the Bureau of Public Health Laboratories (BPHL) statewide has been influenza A (H3). In recent weeks, the percent of specimens testing positive for influenza B increased. This trend has also been observed nationally. This late-season circulation of influenza B is expected.

National influenza activity:

- According to the Centers for Disease Control and Prevention, ILI activity decreased and was below the national baseline for the second week in a row. The majority of states, including Florida, reported local activity.
- In recent weeks, influenza B viruses have been the most frequently identified virus type by public health laboratories across the nation.
- Avian influenza A (H7N9) was recently identified in chickens in Tennessee, Alabama, and Kentucky. Avian influenza A (H7) was
 also recently identified in chickens in Georgia.
 - These strains of H7N9 are not the same as the strain circulating in China.
 - These are the first identifications of H7N9 in domestic poultry in the U.S. in 2017.
- Avian influenza A (H5N2) was also recently identified in turkeys in Wisconsin.
 - This is the first identification of H5N2 in domestic poultry in the U.S. in 2017.
- No avian influenza has been identified in Florida birds or humans so far in 2017.
 - To learn more about HPAI, please visit: <u>www.floridahealth.gov/novelflu</u>.

Florida Arbovirus Surveillance

Andrea Bingham, PhD, MSPH, Dana Giandomenico, MPH, and Danielle Stanek, DVM, DOH Bureau of Epidemiology; Lea Heberlein-Larson, Lylah Seaton, and Valerie Mock, DOH Bureau of Public Health Laboratories; Carina Blackmore, DVM, PhD, DOH Division of Disease Control and Health Protection.

Arbovirus surveillance in Florida includes endemic mosquito-borne viruses such as West Nile virus (WNV), Eastern equine encephalitis virus (EEEV), and St. Louis encephalitis virus (SLEV), as well as exotic viruses such as dengue virus (DENV), chikungunya virus (CHIKV) and California encephalitis group viruses (CEV). Malaria, a parasitic mosquito-borne disease is also included. During the period of April 23-29, 2017, the following arboviral activity was recorded in Florida.

This report contains information for all arboviruses in 2017 and Zika virus only for 2016.

WNV activity: No human cases of WNV infection were reported this week. No horses with WNV infection were reported this week. One sentinel chicken tested positive for antibodies to WNV this week in Walton County. In 2017, positive samples from six sentinel chickens have been reported from three 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 2017, a positive sample from one sentinel chicken has been reported from one county.

EEEV activity: No human cases of EEEV infection were reported this week. No horses with EEEV infection were reported this week. No sentinel chickens tested positive for antibodies to EEEV this week. In 2017, there have been no positive samples reported.

International Travel-Associated Dengue Fever Cases: One case of dengue fever was reported this week in a person that had international travel. In 2017, one travel-associated case has been reported.

Dengue Fever Cases Acquired in Florida: No cases of locally acquired dengue fever were reported this week. In 2017, 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 2017, one travel-associated case has been reported.

Chikungunya Fever Cases Acquired in Florida: No cases of locally acquired chikungunya fever were reported this week. In 2017, no cases of locally acquired chikungunya fever have been reported.

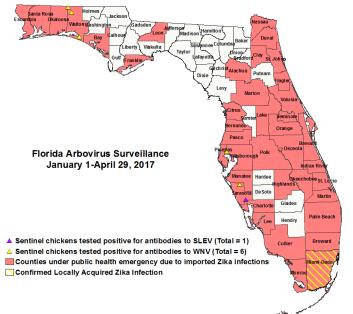
International Travel-Associated Zika Fever Cases: Seven cases of Zika fever was reported this week in persons that had international travel. In 2017, 33 cases have been reported. In 2016, 1122 travel-associated cases were reported.

Zika Fever Cases Acquired in Florida: In 2017, two cases of locally acquired Zika fever have been reported. In 2016, 285 local cases were reported.

Advisories/Alerts: No counties are currently under mosquito-borne illness advisory or alert. Forty counties are currently under a declared public health emergency due to the identification of travel-associated Zika infections: Alachua, Bay, Brevard, Broward, Charlotte, Citrus, Clay, Collier, Duval, Escambia, Flagler, Franklin, Hernando, Highlands, Hillsborough, Indian River, Lake, Lee, Leon, Manatee, Marion, Martin, Miami-Dade, Monroe, Nassau, Okaloosa, Okeechobee, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, St. Johns, St. Lucie, Santa Rosa, Sarasota, Seminole, Volusia, and Walton Counties.

There are no areas of ongoing, active Zika transmission in Florida. However, isolated local Zika cases continue to be identified in Miami-Dade County. CDC currently designates Miami-Dade County as a cautionary area and recommends that pregnant women should consider postponing travel to the county. For additional information on current CDC recommendations, please visit <u>https://www.cdc.gov/zika/</u> <u>intheus/florida-update.html</u>. Zika zones were lifted in Wynwood (September 19), North Miami Beach (November 22), Little River (December 2), and South Miami Beach (December 9) after 45 days with no evidence of active Zika transmission.

There is a Level 2 (Alert) Travel Health Notice from the CDC for multiple countries in the Caribbean, Central and South America, Mexico, Cape Verde, Southeast Asia, and Pacific Islands related to Zika virus transmission and an association with poor pregnancy outcomes. Pregnant women should consider postponing travel to these areas. There is a Level 2 Travel Health Notice from the CDC for Brazil related to the transmission of Yellow Fever virus. There is a Level 1 (Watch) Travel Health Notice from the CDC for multiple countries in the Caribbean, Central and South America, and Mexico, related to the transmission of chikungunya virus. Additional information on travel health notices can be found at the following link: http://wwwnc.cdc.gov/travel/notices.



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	A	April YTD					
Epidemiology Disease Summary	2017	2016	2017	2016			
CNS Diseases and Bacteremias							
Creutzfeldt-Jacob Disease (CJD)	-	-	-	-			
Haemophilus influenzae	-	4	3	4			
Legionellosis	1	1	1	2			
Listeriosis	-	-	-	-			
Meningitis, Bacterial or Mycotic	-	-	3	-			
Meningococcal Disease	-	-	-	-			
S. aureus Infection, Intermediate Resistance to Vancomycin (VISA)	_	-	-	-			
Strep pneumoniae Invasive Disease, Drug-Resistant	_	-	-	2			
Strep pneumoniae Invasive Disease, Drug-Susceptible	1	7	4	9			
Enteric Infections							
Campylobacteriosis	7	8	25	27			
Cholera (Vibrio cholerae Type O1)	_	_	-	-			
Cryptosporidiosis	_	1	1	2			
Cyclosporiasis	_	_	_	-			
Escherichia coli Shiga Toxin-Producing (STEC)	2	2	3	6			
Giardiasis	2	2	8	6			
Hemolytic Uremic Syndrome (HUS)	-	-	1	-			
Salmonellosis	3	1	23	19			
Shigellosis	2	-	6	4			
Typhoid Fever		_	-	-			
Vibriosis	1		2				
Vaccine Preventable Diseases		-	2	-			
Measles	_	_	_	_			
Mumps	_	_					
Pertussis	-	1	1	5			
Varicella	3	1	4	3			
Vector Borne, Zoonoses							
Chikungunya Fever	_	_	_	_			
Eastern Equine Encephalitis Neuroinvasive Disease	_	_	_	_			
Ehrlichiosis/Anaplasmosis		_	_	_			
Lyme Disease	_	_	6	_			
Malaria	_	_	-	_			
Rabies, Animal		2		2			
Rabies, Possible Exposure	19	15	34	52			
Rocky Mountain Spotted Fever and Rickettsiosis	-	15	-	52			
West Nile Virus Neuroinvasive Disease							
Zika Virus Disease and Infection	-	1	-	1			
Viral Hepatitis	-		-				
Hepatitis A	_	1	-	2			
Hepatitis B, Acute	1	11	14	39			
Hepatitis B, Chronic	10	9	47	31			
Hepatitis B, Surface Antigen in Pregnant Women	10	-	3	1			
Hepatitis C, Acute	1	1	4	8			
Hepatitis C, Chronic	84	72	320	275			
Other	UT	12	520	215			
Carbon Monoxide Poisoning	1	1	3	3			
Hansen's Disease (Leprosy)	-	-	1	-			
Influenza-Associated Pediatric Mortality		_	_	_			
Lead Poisoning	3	- 5	- 7	12			
Mercury Poisoning	1	-	1	1			
Pesticide-Related Illness and Injury	_	_	_	_			
Total	143	146	525	516			
i otal	כדו	170	525	510			

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STD Morbidity Statistics

- Chlamydia = 71
- Gonorrhea = 29
- Syphilis = 1
- HIV = 1

Women under 25 and older women with risk factors need testing every year.

HIV Outreach Statistics

- 90 individuals were tested for HIV
- 4 individuals were tested for Syphilis
- 63 rapid Hepatitis tests performed



Jail Linkage Statistics

- 37 rapid HIV tests performed (1 positive)
- 32 Hepatitis tests performed (8 positive)
- 6 RPR tests performed (0 positive)
- 0 Gonorrhea/Chlamydia tests performed (0 positive)
- 37 individuals were HIV post-test counseled

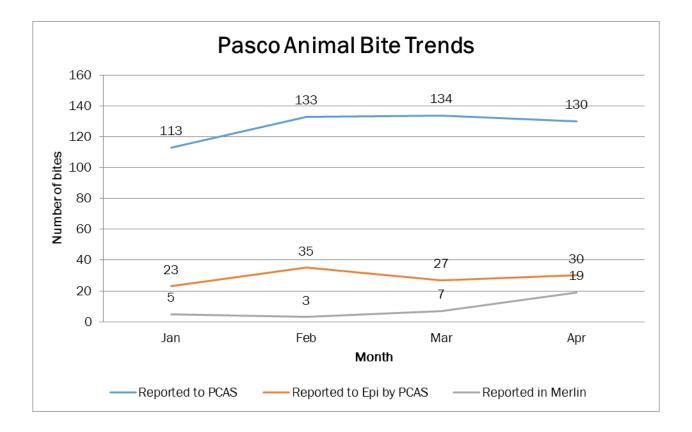
Tuberculosis & Refugee Health Statistics

• Data unavailable for April 2017



Animal Bites

- Pasco County Animal Services (PCAS) received 130 animal bites in April
- PCAS reported 30 of 130 (23%) cases to PCHD for follow-up
- 19 of 30 (63%) were reported in Merlin after meeting case definition
- DOH Pasco sent 5 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.



Precautionary Recall of Organic Marketside Spring Mix Salad is Announced by Fresh Express

Orlando, Fla., - Fresh Express is announcing a precautionary recall of a limited number of cases of Organic Marketside Spring Mix.

The item subject to the recall is 5 oz. Organic Marketside Spring Mix marketed in a clear container with production code G089B19 and best-if-used-by date of APR 14, 2017 located on the front label, and UPC code 6 8113132897 5 located on the bottom of the container. The recalled salads were distributed only to Walmart stores located in the Southeastern region of the United States.

The recall was necessitated when Fresh Express was notified that extraneous animal matter was allegedly found in a single container of the salad. Out of an abundance of caution, all salads manufactured in the same production run are being recalled.

No other Marketside salads are included in the recall. Fresh Express salads are not subject to a recall.

Walmart acted quickly to remove the product from store shelves.

Consumers who may have already purchased the recalled product should discard and not consume it. A full refund is available where purchased or by calling the Fresh Express Consumer Response Center toll-free at (800) 242-5472 during the hours of 8 a.m. to 7 p.m. Eastern Time.

Upon receiving notification, both Walmart and Fresh Express food safety and rapid response teams, in close coordination with regulatory authorities, acted immediately to review all relevant records, launch an intensive investigation and initiate product removal and recall procedures.

Fresh Express takes matters of food safety very seriously and rigorously complies with all food safety regulations including the proscribed Good Agricultural Practices. In addition, a range of stringent controls are in place during growing and harvesting to mitigate against field material from entering the raw product system. In manufacturing, additional controls including thorough washing and filtration systems as well as visual inspections that are designed to eliminate unwanted debris.

Recalled Product Distribution

Fresh Express Precautionary Recall, 5 oz. Organic Marketside Spring Mix (No other Marketside Salads and No Fresh Express Salads are included in this recall)

Brand	PRODUCT NAME	SIZE	UPC	PRODUCTION CODE	BEST IF USED BY DATE	POSSIBLE DISTRIBUTION STATES
Marketside	Organic Spring Mix	5 oz.	6 8113132897 5	G089B19	APR 14 2017	AL, FL, GA, LA, MS, NC, SC, VA,

https://www.fda.gov/Safety/Recalls/ucm551649.htm

Frito-Lay Recalls Jalapeño Flavored Lay's Kettle Cooked Potato Chips and Jalapeño Flavored Miss Vickie's Kettle Cooked Potato Chips Due to Potential Presence of *Salmonella*

FOR IMMEDIATE RELEASE — April 21, 2017 — Frito-Lay today announced it is voluntarily recalling select Jalapeño Flavored Lay's Kettle Cooked potato chips and Jalapeño Flavored Miss Vickie's Kettle Cooked potato chips due to the potential presence of *Salmonella* in the seasoning. *Salmonella* is an organism which can cause serious and sometimes fatal infections in young children, frail or elderly people, and others with weakened immune systems. Healthy persons infected with *Salmonella* often experience fever, diarrhea (which may be bloody), nausea, vomiting and abdominal pain. In rare circumstances, infection with *Salmonella* can result in the organism getting into the bloodstream and producing more severe illnesses such as arterial infections (i.e., infected aneurysms), endocarditis and arthritis.

This action is the direct result of a supplier's recent recall of a seasoning blend which includes jalapeño powder that could contain *Salmonella*. Although no *Salmonella* was found in the seasoning supplied to Frito-Lay, the company has decided to recall these products out of an abundance of caution.

No illness related to this matter has been confirmed to date.

The products covered by this recall were distributed in retail stores and via foodservice, vending and other channels throughout the U.S.

The specific recalled product information is listed below:

- All sizes of the following two products that have a "guaranteed fresh" date of JUL 4 or priorprinted on the front upper panel of the package:
 - Jalapeño Flavored Lay's Kettle Cooked potato chips
 - Jalapeño Flavored Miss Vickie's Kettle Cooked potato chips
- All of the following multipack offerings that have a "use by" date of JUN 20 or prior printed on the multipack package. In
 addition, a "guaranteed fresh" date of JUL 4 or prioris printed on the front upper panel of the individual recalled product
 packages inside each multipack offering. Any other products or flavors contained in these multipacks are not being recalled.
 - 12 count Lay's Kettle Cooked Multipack Sack
 - 20 count Frito-Lay Bold Mix Sack
 - 30 count Miss Vickie's Multipack Tray
 - 30 count Lay's Kettle Cooked Multipack Tray
 - 32 count Miss Vickie's Multipack Box

No other flavors of Lay's Kettle Cooked potato chips or Miss Vickie's potato chips are impacted or being recalled. Jalapeño Cheddar Flavored Lay's Kettle Cooked 40% Less Fat potato chips are not impacted or being recalled.

Consumers who have purchased these recalled products are advised not to consume them. Frito-Lay is working with the FDA on this recall to ensure the recalled products are removed from store shelves and are no longer distributed.

Consumers can contact Frito-Lay Consumer Relations at 866-272-9393 for additional information from 9 a.m. to 6 p.m. EST. Representative product images can be found at fritolay.com. For product reimbursement, consumers can visit <u>www.jalapenochiprecall.com</u>.

WFSP Foods LLC. Recalls Ready-To-Eat Chicken Breast Products That May Be Undercooked

Class I Recall 037-2017

Health Risk: High Apr 24, 2017

En Español

Congressional and Public Affairs Kristen Booze (202) 720-9113 Press@fsis.usda.gov

WASHINGTON, April 24, 2017 – WFSP Foods LLC., a Decatur, Ala. establishment, is recalling approximately 42,147 pounds of readyto-eat chicken breast products due to undercooking, resulting in the potential survival of bacterial pathogens in the products, the U.S. Department of Agriculture's Food Safety and Inspection Service (FSIS) announced today.

The ready-to-eat grilled chicken breast items were produced on March 29, 2017 and April 7, 2017. The following products are subject to recall: [View Labels (PDF only)]

- 9-Ib. foodservice cases containing 8 poly film packages of "CHEF'S LINE ALL NATURAL FIRE GRILLED CHICKEN BREAST" with product code 22586, produced on 04/07/17, and Best by date 06/14/17.
- 9-Ib. foodservice cases containing 8 poly film packages of "saladworks FULLY COOKED FLAME GRILLED CHICKEN BREAST FILLETS" with product code 22500, produced on 03/29/17 and Use by date 06/05/17.

The products subject to recall bear establishment number "P-45411" inside the USDA mark of inspection. These items were shipped to a distribution center in Illinois and further distributed to hotel, restaurant and institution locations nationwide.

The problem was discovered when the firm received multiple customer complaints that the ready-to-eat chicken products appeared to be undercooked.

There have been no confirmed reports of illness or adverse reactions due to consumption of these products. Anyone concerned about an injury or illness should contact a healthcare provider.

Consumers who have purchased these products are urged not to consume them. These products should be thrown away or returned to the place of purchase.

FSIS routinely conducts recall effectiveness checks to verify recalling firms notify their customers of the recall and that steps are taken to make certain that the product is no longer available to consumers. When available, the retail distribution list(s) will be posted on the FSIS website at <u>www.fsis.usda.gov/recalls</u>.

Consumers and media with questions about the recall can contact Alan Sterling, Director of Marketing, at (678) 450-3092.

Consumers with food safety questions can "Ask Karen," the FSIS virtual representative available 24 hours a day at <u>AskKaren.gov</u> or via smartphone at <u>m.askkaren.gov</u>. The toll-free USDA Meat and Poultry Hotline 1-888-MPHotline (1-888-674-6854) is available in English and Spanish and can be reached from 10 a.m. to 6 p.m. (Eastern Time) Monday through Friday. Recorded food safety messages are available 24 hours a day. The online Electronic Consumer Complaint Monitoring System can be accessed 24 hours a day at: <u>https://www.fsis.usda.gov/reportproblem</u>.

Florida Department of Health Pasco County



13941 15th Street Dade City, Florida 33525 Phone: 352-521-1450, option 2 Fax: 352-521-1435 Epidemiology Manager: Garik Nicholson, MPH, CIC Epidemiology Staff: Armando Avellanet, DIS Carol Bunting, RN Deb Hensley, MPH, MHA Jennie Pell, MPH, CPH, CIC Zelda Young, DIS

Staff News and Upcoming Events

HIV Outreach staff participated in events at A Helping Rock in Zephyrhills, PHSC in New Port Richey, Atonement Lutheran Church in Wesley Chapel, the Juvenile Detention Center in San Antonio, Vine Church in Zephyrhills, Wilson Academy in Land O' Lakes, BayCare Behavioral Health in New Port Rickey, and the Land O' Lakes Jail.

The Pasco Public Defender Mobile Medical Unit will be parked outside the Florida Department of Health-Pasco County in Dade City on Wednesday, May 31. 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.

Reportable Diseases/Conditions in Florida

Practitioner List (Laboratory Requirements Differ)

Effective June 4, 2014

1



Did you know that you are required* to report certain diseases to your local county health department?

- 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 2 Anthrax I Arsenic poisoning Arboviral diseases not otherwise listed Botulism, foodborne, wound, and unspecified Botulism, infant I **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
- 2 Chikungunya fever, locally acquired
- Chlamydia •
- T Cholera (Vibrio cholerae type O1)
- Ciguatera fish poisoning
- ÷ **Congenital anomalies**
- Conjunctivitis in neonates <14 days old
- Creutzfeldt-Jakob disease (CJD)
- Cryptosporidiosis
- Cyclosporiasis
- Dengue fever
- 2 Dengue fever, locally acquired
- Diphtheria
- Eastern equine encephalitis
- Ehrlichiosis/anaplasmosis
- Escherichia coli infection, Shiga toxinproducing
- Giardiasis, acute
- Glanders
- Gonorrhea

- Granuloma inguinale
- Haemophilus influenzae invasive 1 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
- 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
- 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
- **Pertussis** 2
- Pesticide-related illness and injury, acute

- Report immediately 24/7 by phone upon initial suspicion or laboratory test order 2 Report immediately 24/7 by phone
- Report next business day
 - Other reporting timeframe
 - Plague
 - 1 **Poliomvelitis** 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 2 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 æ 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**

*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.