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CDC finalizes vaccine recommendation for adults traveling to areas with cholera

The Centers for Disease Control and Prevention's recommendation for the use of a cholera vaccine in adults traveling to areas with cholera is now final. The final recommendation was published today in CDC's *Morbidity and Mortality Weekly Report*.

The vaccine, brand name Vaxchora, is a single-dose, live oral cholera vaccine and was [approved](#) by the U.S. Food and Drug Administration (FDA) in 2016 for prevention of cholera caused by serogroup O1. It is approved for use in adults 18 through 64 years old and is the only FDA-approved cholera vaccine in the United States. The federal Advisory Committee on Immunization Practices, composed of medical and public health experts, voted to recommend the vaccine in June 2016.

Most travelers from the United States do not visit areas with active cholera transmission and are rarely at risk. An area of active cholera transmission is defined as an area within a country where cholera is regularly found or where a cholera epidemic is ongoing. This includes areas with cholera activity within the past year prone to a cholera epidemic. This recommendation does not include areas where cases rarely have been reported.

Although cholera is rare, it can kill people quickly if it is not treated. All travelers going to areas with cholera should use and drink safe water, cook food thoroughly, and wash hands properly to prevent cholera infection. Travelers who develop severe diarrhea should seek medical attention, particularly therapy to restore lost fluids, as soon as possible.

More information on the recommendations and the evidence used to support them can be found at https://www.cdc.gov/mmwr/volumes/66/wr/mm6618a6.htm?s_cid=mm6618a6_w.

Cholera is an acute, diarrheal illness caused by infection of the bacteria *Vibrio cholerae*. Additional information about cholera and cholera vaccine is available at <http://www.cdc.gov/cholera/index.html>.

Information about destinations with active cholera transmission is available at <https://wwwnc.cdc.gov/travel/diseases/cholera>.

Source: [CDC](#)

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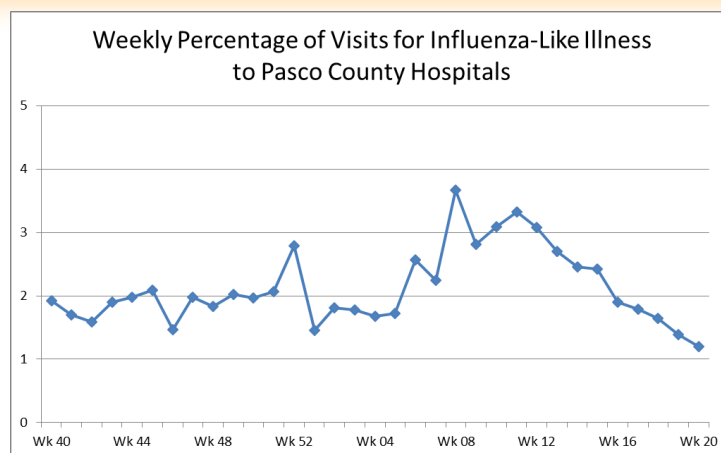
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Influenza Update

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

- Week 20 marks the end of the production of the weekly influenza report. The Florida Department of Health will continue to distribute influenza reports in an abbreviated form during the summer months on a biweekly basis. Surveillance for influenza will continue during the summer months with the focus on identification of outbreaks and unusually severe presentations of influenza or ILI.
- Florida reported sporadic activity to the Centers of Disease Control and Prevention (CDC) in week 20.
- The influenza season is coming to a close. Influenza and ILI activity levels statewide have returned to summer levels.
- In week 20, 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 decreased slightly but remained above levels observed in previous seasons at this time (see page 12).
- In week 19, 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 20, no influenza-associated pediatric deaths were 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.
- Forty-eight counties reported mild influenza activity, three counties reported moderate influenza activity, and 16 counties reported no influenza activity.
- Two outbreaks of influenza and one outbreak of ILI were reported. A total of 152 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.
- 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. 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).



National influenza activity:

- According to the Centers for Disease Control and Prevention, ILI activity decreased and was similar to levels observed in previous seasons at this time.
- In recent weeks, influenza B viruses have been the most frequently identified virus type by public health laboratories across the nation.
- One human infection with novel influenza A virus was recently reported in Texas. The individual was infected with an influenza A (H3N2) variant (H3N2v) virus. The individual became ill in February 2017 but has since fully recovered. Swine contact in the week preceding illness onset was reported. This is the first human influenza A (H3N2v) virus infection in the United States in 2017.
- 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: www.floridahealth.gov/novelflu.

Florida Arbovirus Surveillance

This report contains information for all arboviruses in 2017. For additional information on Zika virus cases from 2016, please visit <http://www.floridahealth.gov/diseases-and-conditions/zika-virus/index.html>.

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 2017, positive samples from seven 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. One sentinel chicken tested positive for antibodies to EEEV this week in Hernando County. In 2017, there have been three positive samples reported from two counties.

International Travel-Associated Dengue Fever Cases: No cases of dengue fever were reported this week in persons that had international travel. In 2017, three travel-associated cases have 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.

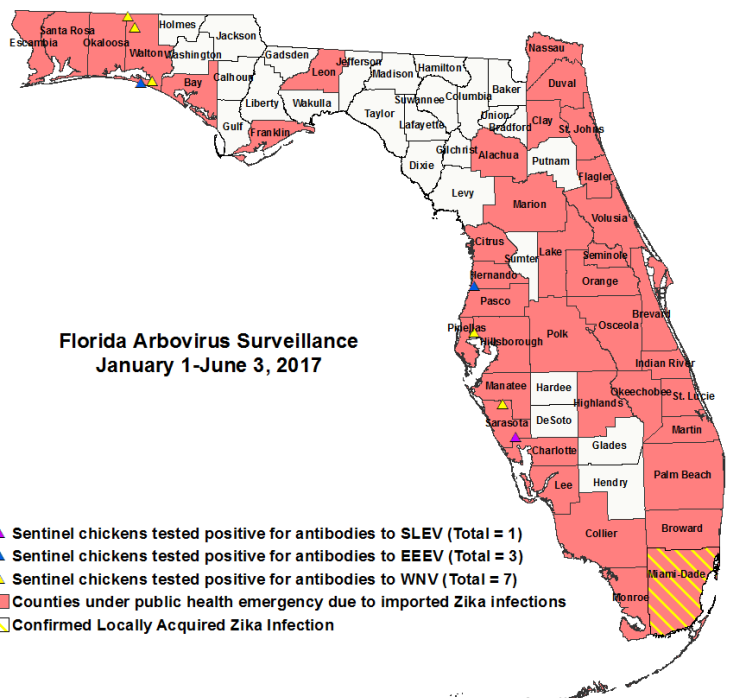
International Travel-Associated Zika Fever Cases: Two cases of Zika fever were reported this week in persons that had international travel. In 2017, 52 cases have been reported.

Zika Fever Cases Acquired in Florida: No cases of Zika virus infection were reported this week. In 2017, four cases of locally acquired Zika fever exposed in 2016 and tested in 2017 have been 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. On June 2nd, CDC removed the cautionary area designation for Miami-Dade County after more than 45 days since the last confirmed local case. For additional information on current CDC recommendations, please visit <https://www.cdc.gov/zika/intheus/florida-update.html>. 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>.



Epidemiology Disease Summary	May		YTD	
	2017	2016	2017	2016
CNS Diseases and Bacteremias				
Creutzfeldt-Jacob Disease (CJD)	-	-	-	-
Haemophilus influenzae	1	2	4	6
Legionellosis	1	2	2	4
Listeriosis	-	-	-	-
Meningitis, Bacterial or Mycotic	1	2	4	2
Meningococcal Disease	1	-	1	-
S. aureus Infection, Intermediate Resistance to Vancomycin (VISA)	-	-	-	-
Strep pneumoniae Invasive Disease, Drug-Resistant	-	-	-	2
Strep pneumoniae Invasive Disease, Drug-Susceptible	-	2	4	11
Enteric Infections				
Campylobacteriosis	14	8	39	35
Cholera (Vibrio cholerae Type O1)	-	-	-	-
Cryptosporidiosis	2	4	3	6
Cyclosporiasis	-	-	-	-
Escherichia coli Shiga Toxin-Producing (STEC)	-	1	3	7
Giardiasis	2	1	10	7
Hemolytic Uremic Syndrome (HUS)	-	-	1	-
Salmonellosis	9	7	32	26
Shigellosis	6	-	12	4
Typhoid Fever	-	-	-	-
Vibriosis	-	-	2	-
Vaccine Preventable Diseases				
Measles	-	-	-	-
Mumps	-	-	-	-
Pertussis	-	-	1	5
Varicella	1	1	5	4
Vector Borne, Zoonoses				
Chikungunya Fever	-	-	-	-
Eastern Equine Encephalitis Neuroinvasive Disease	-	-	-	-
Ehrlichiosis/Anaplasmosis	-	-	-	-
Lyme Disease	-	1	6	2
Malaria	-	-	-	-
Rabies, Animal	-	-	-	2
Rabies, Possible Exposure	5	9	39	61
Rocky Mountain Spotted Fever and Rickettsiosis	1	-	1	-
West Nile Virus Neuroinvasive Disease	-	-	-	-
Zika Virus Disease and Infection	-	-	-	1
Viral Hepatitis				
Hepatitis A	1	-	1	2
Hepatitis B, Acute	9	3	23	42
Hepatitis B, Chronic	5	9	52	40
Hepatitis B, Surface Antigen in Pregnant Women	2	-	5	1
Hepatitis C, Acute	3	3	7	11
Hepatitis C, Chronic	71	177	383	448
Other				
Carbon Monoxide Poisoning	1	1	4	4
Hansen's Disease (Leprosy)	-	-	1	-
Influenza-Associated Pediatric Mortality	-	-	-	-
Lead Poisoning	4	2	11	14
Mercury Poisoning	-	-	1	1
Pesticide-Related Illness and Injury	-	-	-	-
Total	140	235	657	748

STD Morbidity Statistics

- Chlamydia = 113
- Gonorrhea = 51
- Syphilis = 0
- HIV = 0

You can get herpes from an infected sex partner who does not have a visible sore or who may not know he or she is infected because the virus can be released through your skin and spread the infection to your sex partner(s).

HIV Outreach Statistics

- 52 individuals were tested for HIV
- 1 individuals were tested for Syphilis
- 29 rapid Hepatitis tests performed



Jail Linkage Statistics

- 44 rapid HIV tests performed (0 – positive)
- 39 Hepatitis tests performed (8 – positive)
- 0 RPR tests performed (0 – positive)
- 0 Gonorrhea/Chlamydia tests performed (0 – positive)
- 44 individuals were HIV post-test counseled

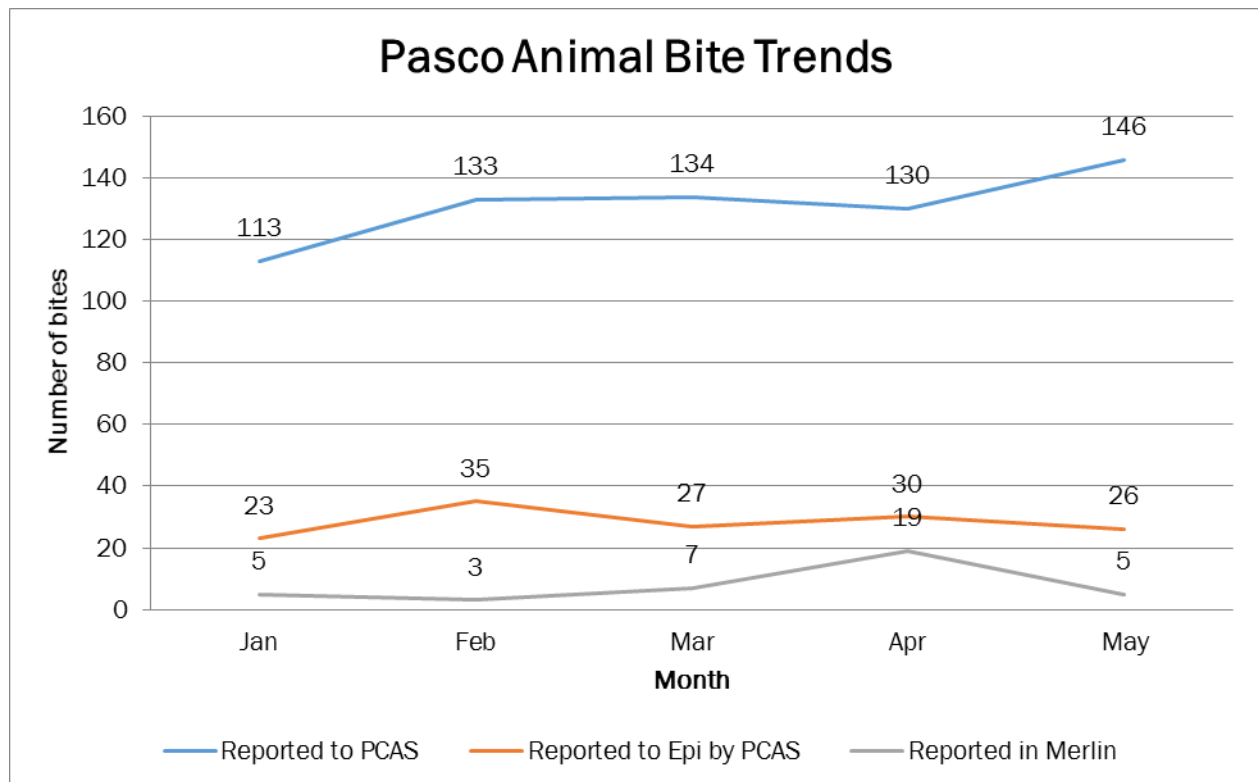
Tuberculosis & Refugee Health Statistics

- 7 TB cases
- 1 Suspect cases
- 18 LTBI clients
- 2 new refugees
- 12 Follow up immunization visits



Animal Bites

- Pasco County Animal Services (PCAS) received 146 animal bites in May
- PCAS reported 26 of 146 (18%) cases to PCHD for follow-up
- 5 of 26 (19%) were reported in Merlin after meeting case definition
- DOH – Pasco sent 10 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.



Zika Cautionary Status Removed—Miami-Dade County

Update from CDC, Miami Dade is no longer under Zika Cautionary status:

Today, the Zika cautionary (yellow) area designation in Miami-Dade county has been lifted in collaboration with the Florida Department of Health because criteria identified in [CDC's Zika Interim Response Plan](#) had been met: more than three mosquito incubation periods (45 days) passed with no additional confirmed local transmission cases and no suspected local transmission cases under investigation with enhanced surveillance in place. Lifting the yellow area designation means that there are no longer any travel recommendations related to Zika virus for Miami-Dade County.

Although we do not know the level of risk of Zika virus transmission after a Zika cautionary (yellow) area designation is lifted, it is likely to be low. However, sporadic cases may still occur. Because of the severe effects of Zika virus infection during pregnancy, we recommend that people living in or traveling to Miami-Dade County continue to protect themselves from mosquito-borne illnesses, including Zika virus. CDC has issued [guidance](#) for areas with a previous Zika cautionary designation in the United States.

Full web link for the updated information:

<https://www.cdc.gov/zika/intheus/florida-update.html>

Enjoy a Safe Swim During Health and Safe Swimming Week and All Summer Long

Tallahassee, Fla.—Memorial Day weekend and the start of the summer season are just around the corner, and the Florida Department of Health encourages residents and visitors to practice safe swim habits so they can make the most of their time with loved ones. This week, May 22-28, is Healthy and Safe Swimming Week, and the department reminds you that taking simple precautions can help maximize the health benefits and fun of swimming.

“As temperatures rise in Florida, swimming becomes a popular part of an ideal summer day,” said State Surgeon General and Secretary of Health Dr. Celeste Philip. “To keep those days spent in the water carefree and fun, I encourage families to take precautions to ensure the water is safe and that an adult is keeping an eye on inexperienced swimmers at all times.”

Water quality is an essential part of enjoying a safe swim, and the department works to keep residents and visitors safe while swimming by conducting routine inspections of public pools to make sure they meet sanitation and safety standards. These reports are available to the public, and you can access the latest inspection reports for public pools and water playgrounds near you by clicking [here](#). The department’s Florida Healthy Beaches program samples water from beaches along the coast and [reports](#) water quality every week.

Follow these simple steps for a healthy and safe swim experience:

- Use a high SPF sunscreen to protect yourself and your family from harmful UV rays that cause sunburn and skin cancer and reapply after swimming;
- Wear insect repellent to prevent mosquito bites and the spread of mosquito-borne illnesses;
- Shower with soap before you get in the water;
- Limit the amount of fresh water going up your nose when swimming can help prevent the infection from the amoeba *Naegleria fowleri*. The amoeba that causes the rare infection of the brain called primary amoebic meningoencephalitis (PAM) is often fatal.
- Don’t swallow the water you swim in;
- Stay out of the water if you have diarrhea, don’t swim until you are diarrhea-free for two weeks;
- Parents should take children on bathroom breaks every 60 minutes;
- Avoid contact with algae blooms;
- Wash your hands after visiting the bathroom or changing diapers; and
- Visit your local hardware or pool-supply store and purchase pool test strips to check the chlorine and pH levels before getting into the water.

Parents should also be aware that the use of swim diapers and swim pants doesn’t necessarily keep fecal bacteria out of the water, and some germs can survive days even in properly chlorinated pools.

In addition to being aware of water quality, Floridians can take simple precautions to prevent injury or drowning. By incorporating [layers of protection](#), including supervision, barriers and emergency preparedness, pool-goers can swim safely and securely.

Swimming is a fun form of exercise and a great way to get some relief from the heat. By following some simple steps, Floridians and visitors can ensure that the water they are swimming is safe and that their time with loved ones won’t be interrupted by injury or illness.

Global Garlic Inc. Expands Recall "Queso Fresco/Whole Milk Cheese" Because of Possible Health Risk

FOR IMMEDIATE RELEASE – May 30, 2017 – Global Garlic Inc., 11501 NW 107th ST, Miami, FL, is recalling its 16oz packages of "Queso Fresco/ Whole Milk" and ("Queso Fresco x LB(Barra)/Whole Milk Cheese" because they have the potential to be contaminated with *Listeria monocytogenes*, and organism which can cause serious and sometimes fatal infections in young children, frail or elderly people, and others with weakened immune systems. Although healthy individuals may suffer only short-term symptoms such as high fever, severe headache, stiffness, nausea, abdominal pain and diarrhea, listeria infection can cause miscarriages and stillbirth among pregnant women.

The recalled "Queso Fresco 16oz / Whole Milk" and ("Queso Fresco x LB(Barra)/Whole Milk Cheese" were distributed nationwide in Florida, Illinois, Kentucky, North Carolina, Louisiana and South Carolina.

The 16oz cheese comes in a clear plastic package marked with a UPC No. 8-9621 1-00235-9 and an expiration date of September 19, 2017 stamped on the side. The pound (barra) cheese weighted around 5-6 Lb., with a clear plastic package, it has no UPC number and expiration date of June 17, 2017.

No illnesses have been reported to date in connection with this problem.

The potential for contamination was noted after routine testing by the Florida Department of Agriculture Consumer Services revealed the presence of *Listeria monocytogenes* in 16 ounce packages of "Queso Fresco/ Whole Milk Cheese".

The production of the product has been suspended while FDA and the company continue to investigate the source of the problem.

Consumers who have purchased 16oz packages of "Queso Fresco/ Whole Milk" and ("Queso Fresco x LB(Barra)/Whole Milk Cheese" are urged to return them to the place of purchase for full refund.

Consumers with questions may contact the company from Monday – Friday 8:00AM -5:30PM EST (305)545-6305.



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Staff News and Upcoming Events

HIV Outreach staff participated in events at 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 Richey, 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 Thursday, June 29. 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](#). To see a full schedule of their stops for the month, check out their [online calendar](#).

FLU VACCINES TO BE OFFERED IN SCHOOLS

In partnership with Pasco County School District and Florida Department of Health - Pasco, Healthy Schools LLC will be providing flu shots to students in all Pasco schools during the first two weeks of October.

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

- ! 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
- ! 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
- ☎ Dengue fever, locally acquired
- ! Diphtheria
 - Eastern equine encephalitis
 - Ehrlichiosis/anaplasmosis
 - *Escherichia coli* infection, Shiga toxin-producing
 - Giardiasis, acute
- ! Glanders
 - Gonorrhea

- 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 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
 - 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

*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..."