

# EpiTimes Volume 7 Issue 1

## Influenza Vaccine Effectiveness Against Pediatric Deaths: 2010–2014

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**BACKGROUND AND OBJECTIVES:** Surveillance for laboratory-confirmed influenza-associated abstract pediatric deaths since 2004 has shown that most deaths occur in unvaccinated children. We assessed whether influenza vaccination reduced the risk of influenza-associated death in children and adolescents.

**METHODS:** We conducted a case-cohort analysis comparing vaccination uptake among laboratory-confirmed influenza-associated pediatric deaths with estimated vaccination coverage among pediatric cohorts in the United States. Case vaccination and high-risk status were determined by case investigation. Influenza vaccination coverage estimates were obtained from national survey data or a national insurance claims database. We estimated odds ratios from logistic regression comparing odds of vaccination among cases with odds of vaccination in comparison cohorts. We used Bayesian methods to compute 95% credible intervals (CIs) for vaccine effectiveness (VE), calculated as  $(1 - \text{odds ratio}) \times 100$ .

**RESULTS:** From July 2010 through June 2014, 358 laboratory-confirmed influenza-associated pediatric deaths were reported among children aged 6 months through 17 years. Vaccination status was determined for 291 deaths; 75 (26%) received vaccine before illness onset. Average vaccination coverage in survey cohorts was 48%. Overall VE against death was 65% (95% CI, 54% to 74%). Among 153 deaths in children with underlying high-risk medical conditions, 47 (31%) were vaccinated. VE among children with high-risk conditions was 51% (95% CI, 31% to 67%), compared with 65% (95% CI, 47% to 78%) among children without high-risk conditions.

**CONCLUSIONS:** Influenza vaccination was associated with reduced risk of laboratory-confirmed influenza-associated pediatric death. Increasing influenza vaccination could prevent influenza-associated deaths among children and adolescents.

[Influenza Vaccine Effectiveness Against Pediatric Deaths: 2010–2014 PDF](#)

### Florida Department of Health Pasco County

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**Confidential fax:** (352) 521-1435

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**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)

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## CDC Issues Level 2 Travel Alert for Brazil – Malaria

### What is the current situation?

Public health officials in [Brazil](#) have reported an outbreak of locally transmitted malaria in the town of Wenceslau Guimarães in Bahia State. Local transmission means that mosquitoes in the area may be infected with malaria and spreading it to people. Although mosquitoes that spread malaria are present in Bahia State, malaria is not usually found there; this outbreak is believed to have started with an infected person who traveled from Pará State, where malaria is known to spread.

[Malaria](#) is a disease spread through mosquito bites. Symptoms usually appear within 7 to 30 days but can take up to a year to develop. Symptoms include high fever, shaking chills, and flu-like illness. Without treatment, malaria can cause severe illness and even death.

The Brazilian Ministry of Health and the public health authorities in Bahia State are monitoring and responding to this outbreak by controlling mosquito populations and educating healthcare providers and the public about malaria.

### What can travelers do to prevent malaria?

At this time, CDC recommends that travelers to Wenceslau Guimarães take medicine to prevent malaria. Travelers to the area should talk with their doctor or nurse about medicine to prevent malaria before they leave the United States. Note: There are other areas in Brazil where CDC recommends travelers take medicine to prevent malaria. See [malaria in Brazil](#) for more information.

Because malaria is spread by mosquito bites, all travelers to Brazil should also [prevent mosquito bites](#) by using insect repellent and wearing protective clothing when outdoors, and sleeping in an air-conditioned or well-screened room or under an insecticide-treated bed net. Learn more about malaria, how to prevent it, and what to do if you think you are infected at CDC's [malaria page for travelers](#).

### Traveler Information

- [Malaria Traveler Brochure](#)
- [Avoid Bug Bites](#)
- [CDC Malaria Website](#)

### Clinician Information

- [Malaria](#) in CDC Health Information for International Travel (“Yellow Book”)
- [Malaria and Travelers](#)
- [Malaria Diagnosis & Treatment in the United States](#)

## CDC Issues Level 2 Travel Alert for Brazil – Yellow Fever

In early 2017, the Brazilian Ministry of Health reported outbreaks of yellow fever in several eastern states, including areas where yellow fever was not traditionally considered to be a risk. Although virus spread decreased by mid-2017, yellow fever cases have reappeared in several states since the end of 2017, especially in São Paulo State, including areas close to the city of São Paulo. In early 2018, the GeoSentinel Surveillance System reported a case of yellow fever in an unvaccinated Dutch traveler who had stayed near the São Paulo metropolitan region.

In response to the outbreak, the World Health Organization expanded the list of areas where yellow fever vaccination is recommended for international travelers to Brazil. Most recently, the city of São Paulo was added to this expanded list (below). Please note that this list contains temporary expanded vaccine recommendations.

In addition to areas in Brazil where yellow fever vaccination has been recommended since before the recent outbreaks, it is now also recommended for people who are traveling to or living in:

- All of Espírito Santo State.
- All of Rio de Janeiro State, including the city of Rio de Janeiro.
- All of São Paulo State, including the entire city of São Paulo.
- A number of cities in Bahia State.

The Brazilian Ministry of Health maintains a regular list of all other cities in Brazil for which yellow fever vaccination has been recommended since before the recent outbreaks. This list does not include recently added areas above. It is located at <http://portalsaude.saude.gov.br/images/pdf/2015/novembro/19/Lista-de-Municipios-ACRV-Febre-Amarela-Set-2015.pdf>.

Note: Because yellow fever vaccination was previously recommended (and continues to be recommended) in western parts of the states of São Paulo and Bahia, some cities in each of these states are included on the regular list.

### Who should get this vaccine?

Anyone 9 months or older who travels to or lives in these areas should be vaccinated against yellow fever. Because of current limitations in the availability of yellow fever vaccine in the United States, travelers may need to contact a [yellow fever vaccine provider](#) well in advance of travel.

Source: [CDC](#)

## Influenza Update

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

- Flu activity increased sharply for the fourth week in a row and remained higher than any other recent flu season. In week 5, flu activity was above peak levels observed in past flu seasons.
- People at high-risk for complications from influenza infection, such as children, adults aged 65 years and older and pregnant women continued to be most impacted.
- No new influenza-associated pediatric deaths were confirmed. Five influenza-associated pediatric deaths have been confirmed in the 2017-18 influenza season.
- Overall, deaths due to pneumonia and influenza were higher than expected and are expected to increase over the coming weeks. Most deaths occurred in people aged 65 years and older. The majority of deaths in people aged 64 years and younger occurred in people with underlying health conditions (58%).
- Eighty-two outbreaks of influenza and ILI were reported: 37 with confirmation of influenza and 45 ILI. As of week 5 (ending February 3, 2018), 319 outbreaks of influenza and ILI have been reported since the start of the 2017-18 season.

### Immunizations and prevention:

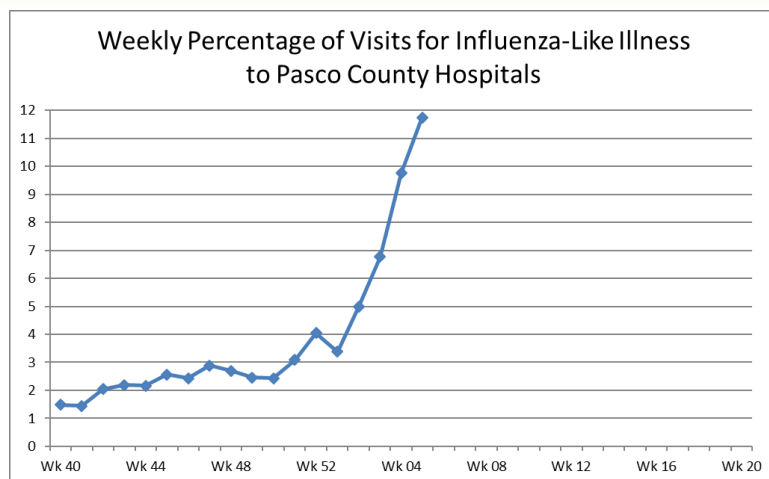
- The Florida Department of Health recommends that sick people stay home until fever-free for at least 24 hours (without the use of fever-reducing medication) and that all people use good handwashing practices.
- Those who have not been vaccinated should get vaccinated as soon as possible. Though flu vaccines can vary in effectiveness from season to season, flu vaccines are safe and are the best way to prevent influenza infection and serious influenza complications. To find a flu shot near you, please visit: [www.floridahealth.gov/findaflushot](http://www.floridahealth.gov/findaflushot).
- A recent study showed that flu vaccination can reduce a child's likelihood of dying from influenza by 50-60%. For more information, visit: <https://www.cdc.gov/media/releases/2017/p0403-flu-vaccine.html>.

### Treatment:

- The Centers for Disease Control and Prevention (CDC) recommends the use of antiviral treatment as soon as possible for all hospitalized, severely ill, and people who are at higher risk for complications with suspect influenza: children <2 years old, adults ≥65 years old, pregnant women, and those with underlying medical conditions. Treatment should be administered within 48 hours of illness onset (but treatment administered after this period can still be beneficial). A recent CDC health advisory stresses the importance of rapid and early antiviral treatment this season. For more information, visit: <http://www.floridahealth.gov/diseases-and-conditions/influenza/documents/cdc-han-influenza-12-27-2017.pdf>.
  - Clinicians should not wait for laboratory confirmation to administer antivirals to people with suspect influenza.

### National influenza activity:

- Influenza activity continued to increase and was well above the national baseline. Most states are experiencing high levels of ILI activity.
- As in Florida, influenza A (H3) has been the most common strain of influenza identified.



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## Florida Arbovirus Surveillance

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 January 28-February 3, 2018, the following arboviral activity was recorded in Florida.

**WNV activity:** No human cases of WNV infection were reported this week. No horses with WNV infection were reported this week. Three sentinel chickens tested positive for antibodies to WNV this week in Hillsborough and Sarasota counties. In 2018, positive samples from ten sentinel chickens have been reported from five 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 2018, there have been no positive samples reported.

**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 2018, positive samples from one horse and one sentinel chicken have been 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 2018, no travel-associated cases have been reported.

**Dengue Fever Cases Acquired in Florida:** No cases of locally acquired dengue fever were reported this week. In 2018, 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 2018, no travel-associated cases have been reported.

**Chikungunya Fever Cases Acquired in Florida:** No cases of locally acquired chikungunya fever were reported this week. In 2018, no cases of locally acquired chikungunya fever have been reported.

**International Travel-Associated Zika Fever Cases:** Three cases of Zika fever were reported this week in persons that had international travel. In 2018, four cases have been reported.

**Zika Fever Cases Acquired in Florida:** No cases of locally acquired Zika fever were reported this week. In 2018, no cases of locally acquired have been reported.

**Advisories/Alerts:** No 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 <https://www.cdc.gov/zika/intheus/florida-update.html>. For additional information on Zika virus cases from 2016 or 2017, including up-to-date numbers, please visit <https://zikafreefl.org/>.

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 also a Level 2 Travel Health Notice for Brazil and a Level 1 Travel Health Notice in Nigeria related to the transmission of yellow fever virus. There is also a Level 1 Travel Health Notice for Sri Lanka related to the transmission of dengue virus. Additional information on travel health notices can be found at the following link: <http://wwwnc.cdc.gov/travel/notices>. For a map of arboviral disease activity in the United States, please visit the following link: [https://wwwn.cdc.gov/arboNET/maps/ADB\\_Diseases\\_Map/index.html](https://wwwn.cdc.gov/arboNET/maps/ADB_Diseases_Map/index.html).



Epidemiology Disease Summary	January		YTD	
	2018	2017	2018	2017
<b>CNS Diseases and Bacteremias</b>				
Creutzfeldt-Jacob Disease (CJD)	-	-	-	-
Haemophilus influenzae	1	1	1	1
Legionellosis	-	-	-	-
Meningitis, Bacterial or Mycotic	-	2	-	2
Meningococcal Disease	-	-	-	-
S. aureus Infection, Intermediate Resistance to Vancomycin (VISA)	-	-	-	-
Strep pneumoniae Invasive Disease, Drug-Resistant	1	-	1	-
Strep pneumoniae Invasive Disease, Drug-Susceptible	1	1	1	1
<b>Enteric Infections</b>				
Campylobacteriosis	11	6	11	6
Cholera (Vibrio cholerae Type O1)	-	-	-	-
Cryptosporidiosis	1	1	1	1
Cyclosporiasis	-	-	-	-
Escherichia coli Shiga Toxin-Producing (STEC)	1	1	1	1
Giardiasis	2	2	2	2
Hemolytic Uremic Syndrome (HUS)	-	1	-	1
Listeriosis	-	-	-	-
Salmonellosis	5	7	5	7
Shigellosis	1	2	1	2
Typhoid Fever	2	-	2	-
Vibriosis	-	-	-	-
<b>Vaccine Preventable Diseases</b>				
Measles	-	-	-	-
Mumps	1	-	1	-
Pertussis	-	-	-	-
Varicella	1	-	1	-
<b>Vector Borne, Zoonoses</b>				
Brucellosis	-	-	-	-
Chikungunya Fever	-	-	-	-
Eastern Equine Encephalitis Neuroinvasive Disease	-	-	-	-
Ehrlichiosis/Anaplasmosis	-	-	-	-
Lyme Disease	-	-	-	-
Malaria	-	-	-	-
Rabies, Animal	-	-	-	-
Rabies, Possible Exposure	14	5	14	5
Rocky Mountain Spotted Fever and Rickettsiosis	-	-	-	-
West Nile Virus Neuroinvasive Disease	-	-	-	-
Zika Virus Disease and Infection	-	-	-	-
<b>Viral Hepatitis</b>				
Hepatitis A	1	-	1	-
Hepatitis B, Acute	3	-	3	-
Hepatitis B, Chronic	8	5	8	5
Hepatitis B, Surface Antigen in Pregnant Women	1	2	1	2
Hepatitis C, Acute	3	2	3	2
Hepatitis C, Chronic	91	43	91	43
Hepatitis D	1	-	1	-
<b>Other</b>				
Carbon Monoxide Poisoning	1	-	1	-
Hansen's Disease (Leprosy)	-	-	-	-
Influenza-Associated Pediatric Mortality	-	-	-	-
Lead Poisoning	1	3	1	3
Mercury Poisoning	-	-	-	-
Pesticide-Related Illness and Injury	-	-	-	-
<b>Total</b>	<b>152</b>	<b>84</b>	<b>152</b>	<b>84</b>

## STD Morbidity Statistics

- Chlamydia = 96
- Gonorrhea = 27
- Syphilis = 2
- HIV = 1

Rarely, chlamydia can prevent a man from being able to have children

## HIV Outreach Statistics

- 85 individuals were tested for HIV
- 3 individuals were tested for Syphilis
- 51 rapid Hepatitis tests performed



## Jail Linkage Statistics

- 75 rapid HIV tests performed (0 – positive)
- 58 Hepatitis tests performed (23 – positive)
- 0 RPR tests performed (0 – positive)
- 0 Gonorrhea/Chlamydia tests performed (0 – positive)
- 75 individuals were HIV post-test counseled

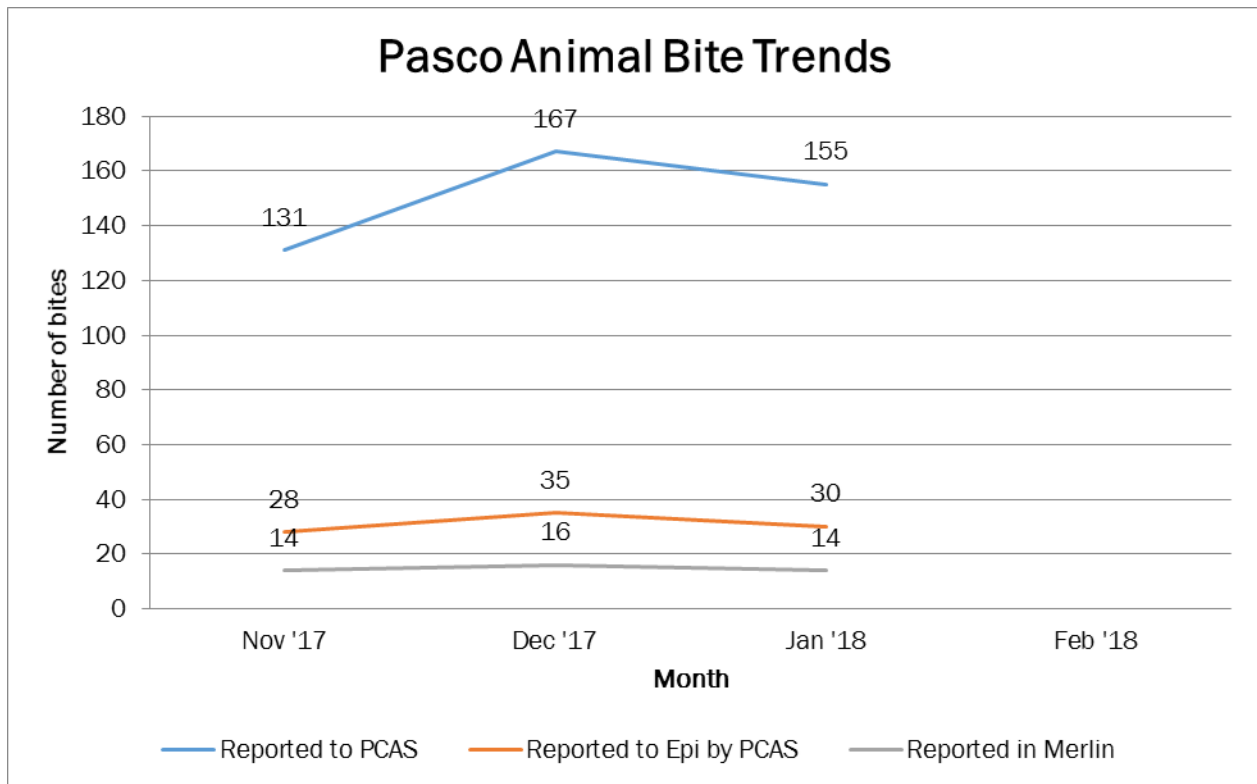
## Tuberculosis & Refugee Health Statistics

- 4 TB cases
- 3 Suspect cases
- 14 LTBI clients
- 0 new refugees
- 4 Follow up immunization visits



## Animal Bites

- Pasco County Animal Services (PCAS) received 155 animal bites in January
- PCAS reported 30 of 155 (19%) cases to PCHD for follow-up
- 14 of 30 (47%) were reported in Merlin after meeting case definition
- DOH – Pasco sent 9 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.





## Evershing International Trading Company Recalls Frozen Shredded Coconut Because of Possible Health Risk

**FOR IMMEDIATE RELEASE** — January 3, 2018 — Evershing International Trading Company is recalling 16 ounces Coconut Tree Brand Frozen Shredded Coconut (Item number 331223, UPC 05216-44081) because they have the potential to be contaminated with *Salmonella*, an organism which can cause serious and sometimes fatal infections in young children, frail or elderly people, and others with weakened immune system. 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 in to the bloodstream and producing more severe illnesses such as arterial infections (i.e., infected aneurysms), endocarditis and arthritis. No illnesses have been reported to date.

This coconut products were distributed in Ohio, Massachusetts, Washington, California, Oklahoma, Illinois, Michigan, New Jersey, New York, Pennsylvania, Oregon, Florida, and Texas. This Frozen Shredded Coconut product is package in 16 ounces plastic bags. This recall is limited to Lot SE07A1, but the lot number is only printed on the case. Therefore, any customer that purchased this product from January 3, 2017 through January 3, 2018, should return the product to place of purchase for full refund. Customers may also contact Evershing International Trading Company at (408) 975-9660 during hours of operation, Monday to Saturday from 9:00 am to 5:00 pm.

The issue was discovered by testing performed by the State of Massachusetts.

This voluntary recall is being made with the knowledge of the US Food and Drug Administration. We appreciate your assistance in this matter.



## Arthri-D, LLC Recalls Dietary Supplement Arthri-D Lot#1701-092 Because of Possible Health Risk

**FOR IMMEDIATE RELEASE** — January 21, 2018 — Arthri-D, LLC is recalling its Dietary Supplement “Arthri-D 120ct” Lot#1701-092 (the “Product”) because it may be contaminated with *Salmonella*, 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.

The Product was distributed nationwide through mail orders. It comes in a 225 cc, white plastic HDPE bottle marked with lot # 1701-092 on the label and with a manufacturing date of March 2017 stamped on the side.

No illnesses have been reported to date in connection with the Product.

The potential for contamination was noted after routine testing by the company revealed the presence of *Salmonella* in 1 bottle. We have tested and re-tested the Product and no presence of *Salmonella* was subsequently found. However, out of abundance of caution, we have decided to recall this Product.

Distribution of the Product has been suspended while FDA and the company continue their investigation as to the source of the *Salmonella* present in that aforementioned 1 bottle.

Consumers who have purchased 120 count of Arthri-D lot#1701-092 are urged to return them to the place of purchase for a full refund. Consumers with additional questions may contact the company at 978-992-0505.

## Break Ventures/California Basics Recalls Dietary Supplement "Zero For Him" 150ct Lot#1710-638 Because of Possible Health Risk

**FOR IMMEDIATE RELEASE** — January 21, 2018 — Break Ventures/California Basics is recalling its Dietary Supplement "Zero for Him 150ct" Lot#1710-638 (the "Product") because it may be contaminated with *Salmonella*, 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.

The Product was distributed nationwide through Amazon. It comes in a 400cc, Light Amber PETE bottle marked with lot #1710-638 on the bottom and with an expiration date of November 2020 stamped on the side.

No illnesses have been reported to date in connection with the Product.

The potential for contamination was noted after routine testing by the company revealed the presence of *Salmonella* in 1 bottle. We have tested and re-tested the Product and no presence of *Salmonella* was subsequently found. However, out of abundance of caution, we have decided to recall this Product.

Distribution of the Product has been suspended while FDA and the company continue their investigation as to the source of the *Salmonella* present in that aforementioned 1 bottle.

Consumers who have purchased Zero for Him Lot#1710-638 are urged to return them to the place of purchase for a full refund. Consumers with additional questions may contact the company at 323-375-5953.

## Rich Products Corporation Recalls Beef Products due to Possible Listeria Contamination

**FOR IMMEDIATE RELEASE** — WASHINGTON, Jan. 24, 2018 – Rich Products Corporation, a Vineland, N.J. establishment, is recalling approximately 3,420 pounds of beef meatball products that may be adulterated with *Listeria monocytogenes*, the U.S. Department of Agriculture's Food Safety and Inspection Service (FSIS) announced today.

The ready-to-eat (RTE) frozen beef meatball items were produced on Dec. 17, 2017. The following products are subject to recall:

- 36-lb. cases containing six 6-lb. bags of "Member's Mark Casa DI BERTACCHI ITALIAN STYLE BEEF MEATBALLS" with a "Best if Used By 17 DEC 2018" label and a lot code of 15507351 on the packaging.

The products subject to recall bear establishment number "EST. 5336" inside the USDA mark of inspection. These items were shipped to distributors in Alabama, Florida, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, and Virginia.

The problem was discovered on Jan. 24, 2018 when FSIS received notification from the firm that they shipped adulterated product into commerce.

Consumption of food contaminated with *L. monocytogenes* can cause listeriosis, a serious infection that primarily affects older adults, persons with weakened immune systems, and pregnant women and their newborns. Less commonly, persons outside these risk groups are affected.

Listeriosis can cause fever, muscle aches, headache, stiff neck, confusion, loss of balance and convulsions sometimes preceded by diarrhea or other gastrointestinal symptoms. An invasive infection spreads beyond the gastrointestinal tract. In pregnant women, the infection can cause miscarriages, stillbirths, premature delivery or life-threatening infection of the newborn. In addition, serious and sometimes fatal infections in older adults and persons with weakened immune systems. Listeriosis is treated with antibiotics. Persons in the higher-risk categories who experience flu-like symptoms within two months after eating contaminated food should seek medical care and tell the health care provider about eating the contaminated food.

FSIS and the company are concerned that some product may be frozen and in consumers' freezers.

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 [www.fsis.usda.gov/recalls](http://www.fsis.usda.gov/recalls).

Consumers with questions regarding the recall can contact Customer Care at Rich Products Corporation at 1-800-356-7094. Media with questions regarding the recall can contact Dwight Gram, Vice President Communications and Public Relations, at 716-878-8749.

Consumers with food safety questions can "Ask Karen," the FSIS virtual representative available 24 hours a day at [AskKaren.gov](http://AskKaren.gov) or via smartphone at [m.askkaren.gov](http://m.askkaren.gov). 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: <http://www.fsis.usda.gov/reportproblem>.



## National Frozen Foods Corporation Recalls Frozen Green Beans and Frozen Mixed Vegetables Because of Possible Health Risk

**FOR IMMEDIATE RELEASE** — January 24, 2018 — National Frozen Foods Corporation (NFFC) is voluntarily recalling a limited quantity of Not-Ready-To Eat Individually Quick Frozen (IQF) green beans and IQF mixed vegetables because they have the potential to be contaminated with *Listeria monocytogenes*, an 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 stillbirths among pregnant women.

Following cooking preparation instructions on the labels of master cases or packages will effectively reduce the risk of exposure to this bacterium

This press release includes recalled products distributed to foodservice accounts in bulk and packaged containers in AK, AR, AZ, CA, CO, FL, ID, IL, KS, MI, MS, MT, ND, NE, NM, NV, OR, TN, TX, VA, and WA. The products being recalled listed below were distributed between August 18, 2017 and January 12, 2018.

The recalled items can be identified by the date codes printed on the back of the 32oz. sized bag or the side of the master case. Only the following codes are affected by this recall:

BRAND LISTED ON PACKAGING	COMMODITY	NET WEIGHT	NFFC ITEM # CUSTOMER #	LOT INFORMATION / CODE PRINTED ON PACKAGING
Bountiful Harvest Foundations	Cut Green Beans	30 LB.	22486-11918 2229881	17100903A02
Bountiful Harvest Originals	Cut Green Beans	30 LB.	22486-11908 2229871	17100903A02
Monarch	Capri Blend	20 LB.	58108-00602 670229	38511-7H11G3N
Monarch	Capri Blend	20 LB.	58108-00602 670229	38511-7H11H3N
NW Treasure	Cut Green Beans	30 LB.	62406-90007 3828405	17102603A02
Simplot Classic	Meadow Blend	32 oz.	71179-67166	965AUG081705H
Sysco Classic	Cut Green Beans	32 oz.	74865-04977 1435197	17102703A03
Sysco Imperial	Whole Green Beans	32 oz.	74865-24917 2101855	17102703A03
(No Brand Name)	Cut Green Beans	30 LB.	15001-01070	38627-7H28A3N
(No Brand Name)	Cut Green Beans	30 LB.	15001-01070	38627-7H28B3N
(No Brand Name)	Cut Green Beans	30 LB.	15001-01070	38627-7H28C3N
(No Brand Name)	Cut Green Beans	30 LB.	15001-01070	38627-7H28D3N
(No Brand Name)	Cut Green Beans	30 LB.	15001-01070	38627-7H28E3N
Valamont*	Cut Green Beans	32 oz.	72608-12082	38474-7H08F3N
Valamont	Cut Green Beans	20 LB.	72608-12150	38510-7H11F3N
The World's Harvest*	Cut Green Beans	32 oz.	WRH99-FV021	38475-7H08F3N
The World's Harvest*	Cut Green Beans	32oz.	WRH99-FV021	38475-7H08G3N

\* The 32 oz. inner clear poly bag has only lot code printed.

The recall was initiated based on a 3rd party test result of the IQF Green Beans only by a downstream customer that revealed that the finished products may potentially be contaminated with the bacteria. There has been no report of human illness to date.

The frozen green beans and frozen mixed vegetables are being recalled as a precaution with the health and safety of consumers as top priority and in full cooperation with the FDA. The recall has not yet been classified by the FDA.

Consumers should not consume these products. Consumers who purchased affected products may return them to the place of purchase for a full refund. Consumers with questions may contact the company at 1-800-253-8269, Monday – Friday 7:30 a.m. to 4 p.m. (Pacific Time).



## 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

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## Staff News and Upcoming Events

HIV Outreach staff participated in events at New Life Assembly of God in Dade City, Central Pasco Girls Academy in Land O' Lakes, Pasco Juvenile Detention Center in San Antonio, A Helping Rock in Zephyrhills, Atonement Lutheran Church in Wesley Chapel, and Vine Church in Zephyrhills.

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

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.

### 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](http://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...