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Who Needs a Flu Vaccine and When

Who should get vaccinated this season?

Everyone 6 months of age and older should get a flu vaccine every season. Vaccination is particularly important for people who are at high risk of serious [complications from influenza](#). See [People at High Risk of Developing Flu-Related Complications](#) for a full list of age and health factors that confer increased risk.

Flu vaccination has [important benefits](#). It can reduce flu illnesses, doctors' visits, and missed work and school due to flu, as well as prevent flu-related hospitalizations. Flu vaccine also has been shown to be life-saving in children. In fact, a 2017 study showed that flu vaccination can significantly reduce a child's risk of dying from flu.

Different flu vaccines are approved for use in different groups of people. There are flu shots approved for use in children as young as 6 months of age and flu shots approved for use in adults 65 years and older. Flu shots also are recommended for use in pregnant women and people with chronic health conditions. The nasal spray flu vaccine is approved for use in non-pregnant individuals, 2 years through 49 years of age. People with some medical conditions [should not receive the nasal spray flu vaccine](#).

There are [many vaccine options](#) to choose from. CDC does not recommend one flu vaccine over another. The most important thing is for all people 6 months and older to get a flu vaccine every year. If you have questions about which vaccine is best for you, talk to your doctor or other health care professional.

More information is available at [Who Should Get Vaccinated Against Influenza](#).

Who Should Not Receive a Flu Shot:

Factors that can determine a person's suitability for vaccination, or vaccination with a particular vaccine, include a person's age, health (current and past) and any relevant allergies.

Information for who cannot get a flu vaccine and who should talk to their doctor before getting a flu vaccine is available at [Who Should & Who Should NOT Get Vaccinated](#).

Special Consideration Regarding Egg Allergy

People with egg allergies can receive any licensed, recommended age-appropriate influenza (flu) vaccine (IIV, RIV4, or LAIV4) that is otherwise appropriate. People who have a history of severe egg allergy (those who have had any symptom other than hives after exposure to egg) should be vaccinated in a medical setting, supervised by a health care provider who is able to recognize and manage severe allergic reactions.

Florida Department of Health Pasco County

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Administrator:
Mike Napier, MS

Epidemiology Manager:
Garik Nicholson, MPH, CIC

Office Hours:
Mon-Fri 8am–5pm

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

Epidemiology: (352) 521-1450, Option 5
Confidential fax: (352) 521-1435

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

Environmental: (727) 841-4425, Option 3

Animal Control (report animal bites): (727) 834-3218
Fax: (813) 929-1218

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

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

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

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Flu vaccine, cont.

When should I get vaccinated?

You should get a flu vaccine before flu viruses begins spreading in your community, since it takes about two weeks after vaccination for antibodies to develop in the body and provide protection against flu. Make plans to get vaccinated early in fall, before flu season begins. CDC recommends that people get a flu vaccine by the end of October, if possible. Getting vaccinated later, however, can still be beneficial and vaccination should continue to be offered throughout the flu season, even into January or later.

Getting vaccinated early (for example, in July or August) is likely to be associated with reduced protection against flu infection later in the flu season, particularly among older adults.

Children who need [two doses](#) of vaccine to be protected should start the vaccination process sooner, because the two doses must be given at least four weeks apart.

Source: [CDC](#)

[Español](#)

Healthy Habits to Help Prevent Flu

The single best way to prevent seasonal flu is to get vaccinated each year, but good health habits like covering your cough and washing your hands often can help stop the spread of germs and prevent respiratory illnesses like the flu. There also are [flu antiviral drugs](#) that can be used to treat and prevent flu. The tips and resources below will help you learn about steps you can take to protect yourself and others from flu and help stop the spread of germs.

- 1. Avoid close contact.** Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.
- 2. Stay home when you are sick.** If possible, stay home from work, school, and errands when you are sick. This will help prevent spreading your illness to others.
- 3. Cover your mouth and nose.** Cover your mouth and nose with a tissue when coughing or sneezing. It may prevent those around you from getting sick. Flu and other serious respiratory illnesses, like respiratory syncytial virus (RSV), whooping cough, and severe acute respiratory syndrome (SARS), are spread by cough, sneezing, or unclean hands.
- 4. Clean your hands.** Washing your hands often will help protect you from germs. If soap and water are not available, use an alcohol-based hand rub.
 - [Handwashing: Clean Hands Save Lives](#) Tips on hand washing and using alcohol-based hand sanitizers
 - [It's a SNAP Toolkit: Handwashing](#) Hand washing resources from the It's A SNAP program, aimed at preventing school absenteeism by promoting clean hands. From the School Network for Absenteeism Prevention, a collaborative project of the CDC, the U.S. Department of Health and Human Services and the American Cleaning Institute.
- 5. Avoid touching your eyes, nose or mouth.** Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.
- 6. Practice other good health habits.** Clean and disinfect frequently touched surfaces at home, work or school, especially when someone is ill. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food.

Source: [CDC](#)

[Español](#)

Andrea Morrison, PhD, MSPH, Dana Giandomenico, MPH, Catherine McDermott, MPH, MHS, and Danielle Stanek, DVM, DOH Bureau of Epidemiology; Lea Heberlein-Larson, Maribel Castaneda, and Valerie Mock, DOH Bureau of Public Health Laboratories; Carina Blackmore, DVM, PhD, DOH Division of Disease Control and Health Protection.

Florida Arbovirus Surveillance

WNV activity: No human cases of WNV infection were reported this week. No horses with WNV infection were reported this week. Sixty sentinel chickens tested positive for antibodies to WNV this week in Brevard, Citrus, Hernando, Hillsborough, Indian River, Lee, Martin, Nassau, Orange, Palm Beach, Polk, Putnam, Sarasota, Seminole, St. Johns, St. Lucie, and Volusia counties. In 2019, positive samples from one blood donor, one horse, one eagle, and 189 sentinel chickens have been reported from 23 counties.

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

EEEV activity: No human cases of EEEV infection were reported this week. One horse with EEEV infection was reported this week in Putnam County. Two sentinel chickens tested positive for antibodies to EEEV this week in Alachua and St. Johns counties. In 2019, positive samples from 26 horses, one emu, one eagle, and 98 sentinel chickens have been reported from 29 counties.

International Travel-Associated Dengue Fever Cases: Fifteen cases of dengue fever were reported this week in persons that had international travel. In 2019, 147 travel-associated cases have been reported.

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

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

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

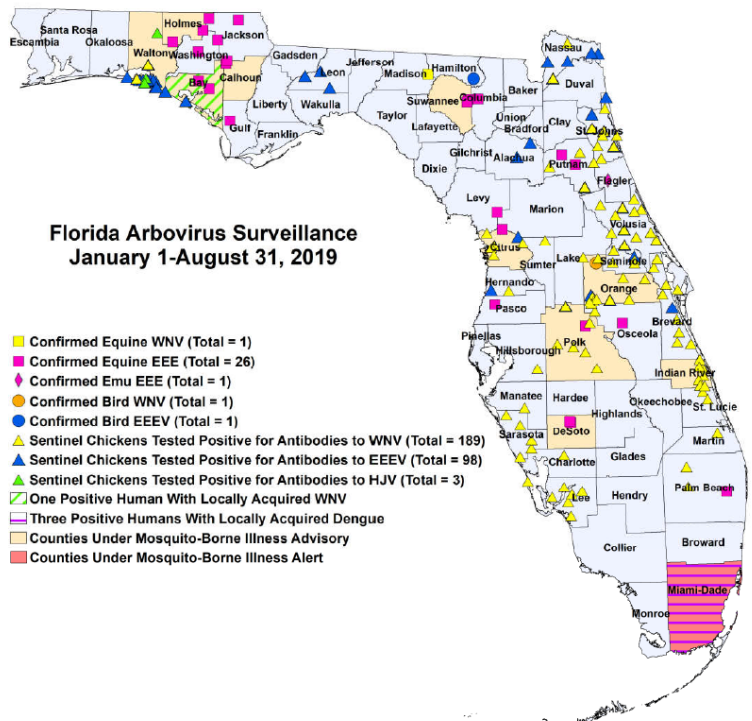
International Travel-Associated Zika Fever Cases: One case of Zika fever was reported this week in a person that had international travel. In 2019, 32 travel-associated cases have been reported.

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

Advisories/Alerts: Bay, Calhoun, Citrus, DeSoto, Holmes, Indian River, Orange, Polk, Suwannee, and Walton counties are currently under a mosquito-borne illness advisory. Miami-Dade County is currently under a mosquito-borne illness alert. No other counties are currently under mosquito-borne illness advisory or alert.

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

There are Level 2 Travel Health Notices for Brazil and Nigeria related to the transmission of yellow fever virus. There are also Level 1 Travel Health Notices for Central and South America, Mexico, the Caribbean, Asia, the Pacific Islands, Africa, and the Middle East related to the transmission of dengue virus and for Burundi related to Malaria transmission. Additional information on travel health notices can be found at the following link: wwwnc.cdc.gov/travel/notices. For a map of arboviral disease activity in the United States, please visit the following link: wwwn.cdc.gov/arbonet/maps/ADB_Diseases_Map/index.html.



Epidemiology Disease Summary	August		YTD	
	2019	2018	2019	2018
CNS Diseases and Bacteremias				
Creutzfeldt-Jacob Disease (CJD)	-	-	-	-
Haemophilus influenzae	1	-	8	10
Legionellosis	2	4	11	14
Meningitis, Bacterial or Mycotic	1	-	1	1
Meningococcal Disease	-	-	-	-
S. aureus Infection, Intermediate Resistance to Vancomycin (VISA)	-	-	-	-
Strep pneumoniae Invasive Disease, Drug-Resistant	1	-	8	3
Strep pneumoniae Invasive Disease, Drug-Susceptible	-	-	12	7
Enteric Infections				
Campylobacteriosis	8	15	81	105
Cholera (Vibrio cholerae Type O1)	-	-	-	-
Cryptosporidiosis	8	-	20	7
Cyclosporiasis	2	2	6	2
Escherichia coli Shiga Toxin-Producing (STEC)	-	2	7	14
Giardiasis	-	5	7	19
Hemolytic Uremic Syndrome (HUS)	-	-	-	-
Listeriosis	-	-	-	1
Salmonella Typhi Infection	1	-	4	3
Salmonellosis	10	14	74	95
Shigellosis	3	1	6	12
Vaccine Preventable Diseases				
Measles	-	-	-	-
Mumps	-	-	-	3
Pertussis	1	3	16	11
Varicella	2	1	10	10
Vector Borne, Zoonoses				
Babesiosis	1	-	1	-
Brucellosis	-	-	-	-
Chikungunya Fever	-	-	-	-
Dengue Fever	1	-	2	-
Eastern Equine Encephalitis Neuroinvasive Disease	-	-	-	-
Ehrlichiosis/Anaplasmosis	-	-	-	-
Herpes B Virus, Possible Exposure	-	-	-	2
Lyme Disease	2	-	4	3
Malaria	1	-	4	1
Rabies, Animal	-	-	2	1
Rabies, Possible Exposure	22	21	156	138
Rocky Mountain Spotted Fever and Rickettsiosis	-	-	1	-
West Nile Virus Neuroinvasive Disease	-	-	-	-
Zika Virus Disease and Infection	-	-	-	1
Viral Hepatitis				
Hepatitis A	18	3	384	25
Hepatitis B, Acute	5	4	54	34
Hepatitis B, Chronic	6	15	92	79
Hepatitis B, Perinatal	-	-	-	-
Hepatitis B, Pregnant Women	-	-	7	4
Hepatitis C, Acute	4	3	57	15
Hepatitis C, Chronic	70	68	510	609
Hepatitis C, Perinatal	-	-	-	2
Hepatitis D	-	-	1	2
Other				
Carbon Monoxide Poisoning	-	-	6	2
Hansen's Disease (Leprosy)	-	-	-	-
Influenza-Associated Pediatric Mortality	-	-	1	-
Lead Poisoning	6	4	46	91
Mercury Poisoning	-	-	-	-
Pesticide-Related Illness and Injury	-	-	-	-
Scombroid Poisoning	-	1	2	1
Vibriosis	3	-	7	2
Total	179	166	1608	1329

STD Morbidity Statistics

- 157 Chlamydia cases
- 48 Gonorrhea cases
- 6 Syphilis cases
- 3 HIV cases

*Provisional data

Repeat outbreaks of genital herpes are common, especially during the first year after infection.

HIV Outreach Statistics

- 114 individuals were tested for HIV
- 112 rapid Hepatitis tests performed



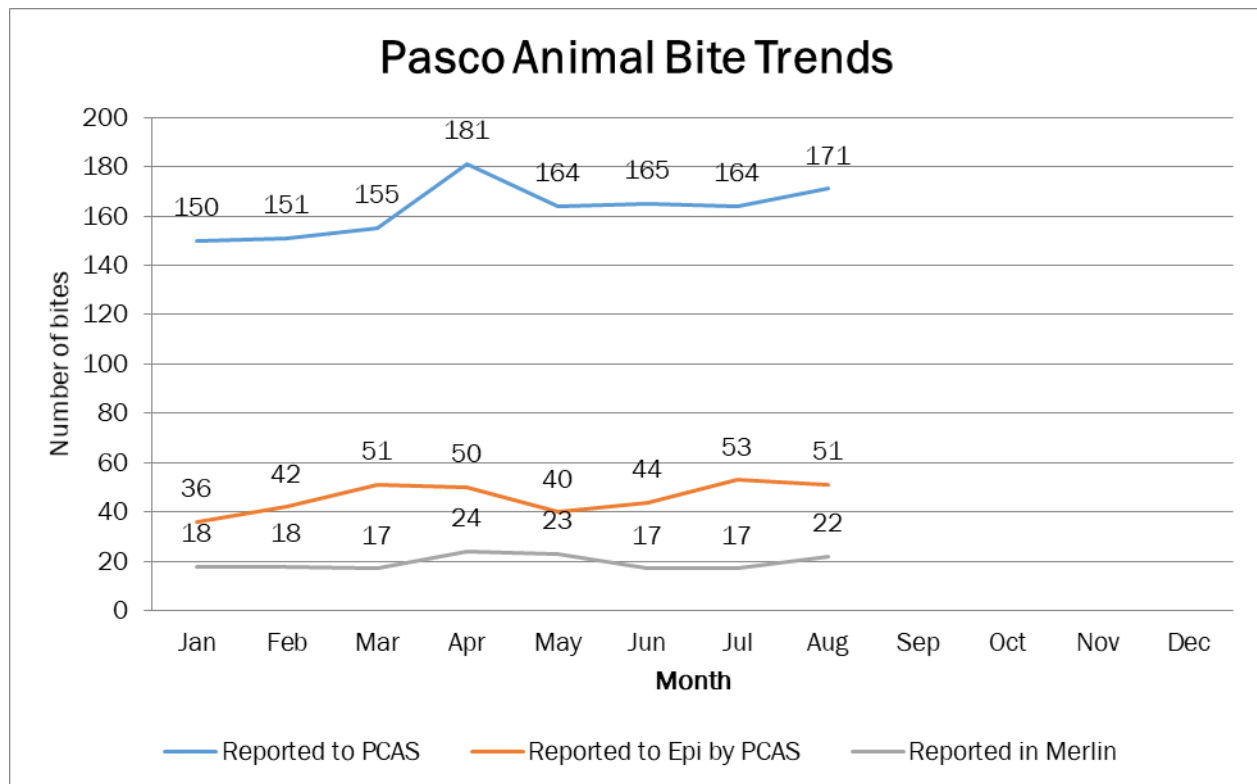
Jail Linkage Statistics

- 61 rapid HIV tests performed (2 positive)
- 45 Hepatitis tests performed (1 positive)
- 61 individuals were HIV post-test counseled



Animal Bites

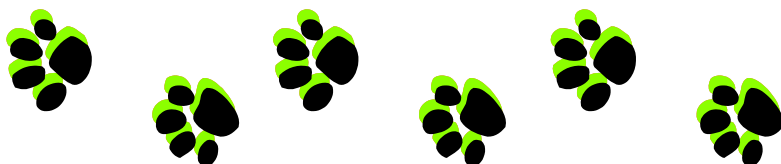
- Pasco County Animal Services (PCAS) received 171 animal bites in January
- PCAS reported 51 of 171 (30%) cases to PCHD for follow-up
- 22 of 51 (43%) were reported in Merlin after meeting case definition
- DOH – Pasco sent 4 animal specimens for rabies testing (0 positive)



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

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

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





Florida Department of Health Pasco County



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Staff News and Upcoming Events

Free Hepatitis A and Hepatitis B vaccines to high risk groups

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

Free Test Fridays

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

Pasco Public Defender Mobile Medical Unit

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

Resources

Florida Health Alert Network

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

Hepatitis C Consultation Service

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

Call for a Phone Consultation

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

Submit a Case for Consultation Online

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

Reportable Diseases/Conditions in Florida

Practitioner List (Laboratory Requirements Differ)



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

Florida Department of Health

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

- ! Report immediately 24/7 by phone upon initial suspicion or laboratory test order
- 📞 Report immediately 24/7 by phone
 - Report next business day
 - + Other reporting timeframe

- ! Outbreaks of any disease, any case, cluster of cases, or exposure to an infectious or non-infectious disease, condition, or agent found in the general community or any defined setting (e.g., hospital, school, other institution) not listed that is of urgent public health significance
- + Acquired immune deficiency syndrome (AIDS)
- 📞 Amebic encephalitis
- ! Anthrax
 - Arsenic poisoning
- ! Arboviral diseases not otherwise listed
 - Babesiosis
- ! Botulism, foodborne, wound, and unspecified
 - Botulism, infant
- ! Brucellosis
 - California serogroup virus disease
 - Campylobacteriosis
- + Cancer, excluding non-melanoma skin cancer and including benign and borderline intracranial and CNS tumors
 - Carbon monoxide poisoning
 - Chancroid
 - Chikungunya fever
- 📞 Chikungunya fever, locally acquired
 - Chlamydia
- ! Cholera (*Vibrio cholerae* type O1)
 - Ciguatera fish poisoning
- + Congenital anomalies
 - Conjunctivitis in neonates <14 days old
 - Creutzfeldt-Jakob disease (CJD)
 - Cryptosporidiosis
 - Cyclosporiasis
- ! Dengue fever
- ! Diphtheria
 - Eastern equine encephalitis
 - Ehrlichiosis/anaplasmosis
 - *Escherichia coli* infection, Shiga toxin-producing
 - Giardiasis, acute
- ! Glanders
 - 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 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...