



Pasco County Health Department

Pasco County Health Department

Main Office
10841 Little Road
New Port Richey, FL 34654
(727)861-5260
www.doh.state.fl.us/chdpasco/default.html

Interim Director

Mike Napier, MS

Executive CH Nursing Director

Carol Cummins, MSN, ARNP

Environmental Administrator

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Epidemiology Manager

Garik Nicholson, MPH

Tuberculosis Program

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Office Hours

Mon-Fri 8am–5pm

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

Epidemiology: (352) 521-1450 opt 6

Confidential fax: (352) 521-1435

TB: (727) 861-5260 ext 253

Confidential fax: (727) 861-4844

Environmental: (813) 558-5173

Animal Control (report animal bites):

(727) 834-3216

Fax: (813) 929-1218

STD/HIV: (727) 861-5260 ext. 173

(W. Pasco) or (352) 521-1450 ext.

345 (E. Pasco)

HIV (testing): (727)861-5260 ext.

177 (W. Pasco) or (352)521-1450

ext. 346 (E. Pasco)

After Hours: Pager (727) 257-1177

Answering Service (727) 815-4088

Rabies

All animal bites and scratches should be taken seriously as they can result in significant injury. Minor skin damage can result in infection while major injury may require surgery to repair. Bites or scratches from wild and domestic animals may present a risk for rabies. Rabies is a deadly virus spread to people from the saliva of infected animals. Transmission usually occurs through a bite or open wound.

Rabies Stats (Jan – Sept)

- ◆ 2 animals tested positive for rabies and both were stray cats
- ◆ 900 animal bites were reported to animal control
- ◆ 15 individuals received rabies vaccinations



Did You Know...?

- ◆ Approximately 60,000 FL residents and visitors are exposed each year by some type of domestic or wild animal
- ◆ Dogs are the major source of animal bites in FL
- ◆ Cats are more likely to have rabies than dogs in FL
- ◆ 1st known human case and fatality in Florida was a 38yo male in 1881
- ◆ Last Florida acquired human case (fatality) was a 35yo male in Tampa in 1948
- ◆ < 10 people have survived clinical rabies

Post – Exposure Prophylaxis Administration

Non- immunized individuals

- ◆ Immediate thorough wound cleansing (i.e. soap and water, if available virucidal)
- ◆ Update Tetanus
- ◆ Human Rabies Immune Globulin (HRIG)
 - ◇ If anatomically feasible, the full dose of HRIG should be thoroughly infiltrated in the area around and into the wounds. Any remaining volume should be administered IM at an anatomical site distant from vaccine administration
 - ◇ HRIG should not be administered in the same syringe as vaccine
 - ◇ Only the recommended dose of HRIG should be given as it can partially suppress vaccine response
- ◆ Rabies vaccine 1.0ml, IM (deltoid area) given on days 0, 3, 7 and 14
 - ◇ The gluteal area should never be used due to reduced production of antibody

Previously immunized individuals

- ◆ Immediate thorough wound cleansing (i.e. soap and water, if available virucidal)
- ◆ Update Tetanus
- ◆ HRIG should **not** be administered
- ◆ Rabies vaccine 1.0ml, IM (deltoid area) given on days 0 and 3

Animal bites should be reported to Pasco County Animal Services via phone (727) 834-3216 or Fax (813) 929-1218.

Sources: www.cdc.gov and Rabies Guide 2012 (Florida Department of Health)

HIV/AIDS/TB 3rd Quarter Summary



<u>Disease</u>	<u>2012</u>	<u>2012</u>	<u>2011</u>
	<u>July - Sept</u>	<u>YTD (Sept)</u>	<u>YTD (Sept)</u>
HIV*	22	49	46
AIDS*	12	26	24
TB**	1	2	2

*Florida Department of Health, Bureau of HIV/AIDS (excluded DOC cases from report)

**Bureau of TB & Refugee Health

Pasco County Health Department offers **FREE RAPID HIV TESTING**.

Get tested today and receive results in 20 minutes!

For more information please visit <http://www.doh.state.fl.us/chdPasco/epi.html> or call (727) 861-5260 ext. 177 or (352) 521-1450 ext 345

2012—13 FLU SEASON IS HERE!!

The Pasco County Health Department (PCHD) would like to remind our community partners that the 2012-13 season is here. It is very important that individuals 6 months and older receive the flu vaccine. Certain individuals have a higher risk of developing serious complications from the flu. CDC recommends individuals who have medical conditions, such as diabetes, asthma and chronic lung disease receive the vaccine. Additional at-risk groups include pregnant women, household contacts, caregivers and people \geq 65 years old.

It is recommended that doctors and nurses begin vaccinating their patients against the flu as soon as the vaccine becomes available. Following vaccination, antibodies generally take about two weeks to develop within the body and provide protection against the flu.

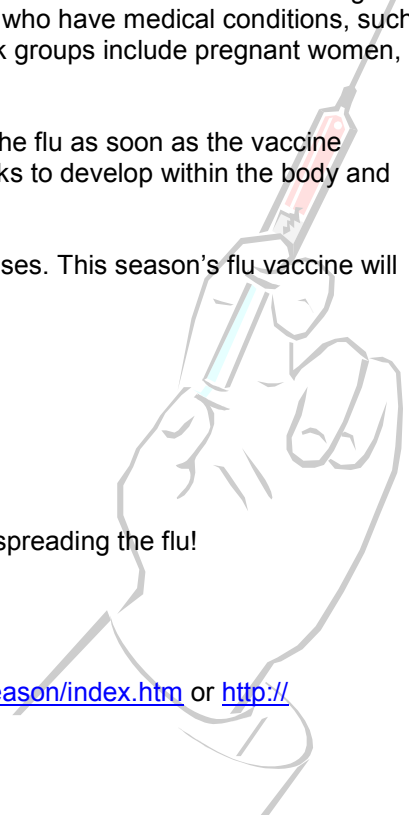
Individuals should receive the flu vaccine every year due to constantly changing viruses. This season's flu vaccine will contain the following viruses below:

- .. Influenza A/California/7/2009 (H1N1)pdm09-like virus
- .. Influenza A/Victoria/361/2011 (H3N2)-like virus
- .. Influenza B/Wisconsin/1/2010-like virus (from the B/Yamagata lineage of viruses)

Remember proper hand-washing is the first line of defense against contracting and spreading the flu!

For more information please visit the CDC websites: <http://www.cdc.gov/flu/about/season/index.htm> or <http://www.flu.gov/> or contact your local health department.

Source: www.cdc.gov





3rd Quarter 2012 Disease Summary



<u>Disease/Condition</u>	<u>2012 July - Sept</u>	<u>2012 YTD</u>	<u>2011 July - Sept</u>	<u>2011 YTD</u>
ANIMAL RABIES	0	2	0	0
ARSENIC	0	1	0	0
CAMPYLOBACTERIOSIS	17	35	9	28
CARBON MONOXIDE POISONING	0	0	0	1
CREUTZFELDT-JAKOB DISEASE	0	1	1	1
CRYPTOSPORIDIOSIS	5	10	2	5
CYCLOSPORIASIS	0	1	0	1
DENGUE	0	0	0	1
EHRlichiosis/ANAPLASMOSIS, HGE, A. PHAG.	0	1	0	0
ESCHERICHIA COLI, SHIGA TOXIN PRODUCING	1	9	0	7
GIARDIASIS	4	14	5	18
HAEMOPHILUS INFLUENZAE (INVASIVE DISEASE)	0	2	1	1
HEPATITIS A	0	3	0	2
HEPATITIS B (+HBsAg IN PREGNANT WOMEN)	1	5	0	3
HEPATITIS B, ACUTE	6	22	2	5
HEPATITIS B, CHRONIC	20	50	14	46
HEPATITIS C, ACUTE	0	1	1	3
HEPATITIS C, CHRONIC	214	538	167	452
HEPATITIS E	0	0	0	1
INFLUENZA A, NOVEL OR PANDEMIC STRAINS	0	0	0	1
LEAD POISONING	7	37	9	26
LEGIONELLOSIS	1	4	0	1
LISTERIOSIS	1	2	0	0
LYME DISEASE	0	2	3	3
MALARIA	0	0	1	1
MENINGITIS, BACTERIAL, CRYPTOCOCCAL, MYCOTIC	0	1	1	1
MENINGOCOCCAL DISEASE	0	0	1	2
MUMPS	0	0	1	1
PERTUSSIS	1	10	3	10
PESTICIDE-RELATED ILLNESS OR INJURY	1	3	0	0
RABIES, POSSIBLE EXPOSURE	39	122	28	90
SALMONELLOSIS	60	89	59	110
SHIGELLOSIS	5	24	11	32
MRSA MORTALITY	0	1	0	0
STREP PNEUMONIAE, INVASIVE DISEASE, DRUG-R	1	9	0	12
STREP PNEUMONIAE, INVASIVE DISEASE, SUSCEPT	3	7	3	15
STREPTOCOCCAL DISEASE INVASIVE GROUP A	2	2	2	4
VARICELLA	2	6	2	13
VIBRIO PARAHAEMOLYTICUS	1	1	0	0
VIBRIO VULNIFICUS	0	0	1	2
Total	392	1015	327	899

*Data retrieved from Merlin - Florida's Disease Registry System

Reportable Diseases/Conditions in Florida

Practitioner* List 11/24/08

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

*Reporting requirements for laboratories differ. For specific information on disease reporting, consult Rule 64D-3, Florida Administrative Code (FAC).

! = 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

! Any disease outbreak	Granuloma inguinale*	! Rabies (possible exposure)
! Any case, cluster of cases, or outbreak of a disease or condition found in the general community or any defined setting such as a hospital, school or other institution, not listed below that is of urgent public health significance. This includes those indicative of person to person spread, zoonotic spread, the presence of an environmental, food or waterborne source of exposure and those that result from a deliberate act of terrorism.	! <i>Haemophilus influenzae</i> (meningitis and invasive disease)	! Ricin toxicity
Acquired Immune Deficiency Syndrome (AIDS)+	Hansen's disease (Leprosy)*	Rocky Mountain spotted fever*
Amebic encephalitis*	☎ Hantavirus infection	! Rubella (including congenital)
Anaplasmosis*	☎ Hemolytic uremic syndrome	St. Louis encephalitis (SLE) virus disease (neuroinvasive and non-neuroinvasive)*
! Anthrax	☎ Hepatitis A	Salmonellosis*
Arsenic poisoning*	Hepatitis B, C, D, E, and G*	Saxitoxin poisoning including paralytic shellfish poisoning (PSP)*
! Botulism (foodborne, wound, unspecified, other)	Hepatitis B surface antigen (HBsAg) (positive in a pregnant woman or a child up to 24 months old)*	! Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV) disease
Botulism (infant)*	Herpes simplex virus (HSV) (in infants up to 60 days old with disseminated infection with involvement of liver, encephalitis and infections limited to skin, eyes and mouth; anogenital in children ≤ 12 yrs)*	Shigellosis*
! Brucellosis	Human Immunodeficiency Virus (HIV) infection (all, and including neonates born to an infected woman, exposed newborn)+	! Smallpox
California serogroup virus (neuroinvasive and non-neuroinvasive disease)*	Human papillomavirus (HPV) (associated laryngeal papillomas or recurrent respiratory papillomatosis in children ≤ 6 years of age; anogenital in children ≤ 12 yrs)*	☎ <i>Staphylococcus aureus</i> , community associated mortality*
Campylobacteriosis*	! Influenza due to novel or pandemic strains	☎ <i>Staphylococcus aureus</i> (infection with intermediate or full resistance to vancomycin, VISA, VRSA)
Cancer (except non-melanoma skin cancer, and including benign and borderline intracranial and CNS tumors)+	☎ Influenza-associated pediatric mortality (in persons aged < 18 yrs)	☎ Staphylococcal enterotoxin B (disease due to)
Carbon monoxide poisoning*	Lead poisoning (blood lead level ≥ 10µg/dL; additional reporting requirements exist for hand held and/or on-site blood lead testing technology, see 64D-3 FAC)*	Streptococcal disease (invasive, Group A)*
Chancroid*	Legionellosis*	<i>Streptococcus pneumoniae</i> (invasive disease)*
Chlamydia*	Leptospirosis*	Syphilis*
! Cholera	☎ Listeriosis	☎ Syphilis (in pregnant women and neonates)
Ciguatera fish poisoning (Ciguatera)*	Lyme disease*	Tetanus*
Congenital anomalies*	Lymphogranuloma venereum (LGV)*	Toxoplasmosis (acute)*
Conjunctivitis (in neonates ≤ 14 days old)*	Malaria*	Trichinellosis (Trichinosis)*
Creutzfeldt-Jakob disease (CJD)*	! Measles (Rubeola)	Tuberculosis (TB)*
Cryptosporidiosis*	! Melioidosis	! Tularemia
Cyclosporiasis*	Meningitis (bacterial, cryptococcal, mycotic)*	☎ Typhoid fever
Dengue*	! Meningococcal disease (includes meningitis and meningococemia)	! Typhus fever (disease due to <i>Rickettsia prowazekii</i> infection)
! Diphtheria	Mercury poisoning*	Typhus fever (disease due to <i>Rickettsia typhi</i> , <i>R. felis</i> infection)*
Eastern equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)*	Mumps*	! Vaccinia disease
Ehrlichiosis*	☎ Neurotoxic shellfish poisoning	Varicella (Chickenpox)*
Encephalitis, other (non-arboviral)*	☎ Pertussis	Varicella mortality*
☎ Enteric disease due to: <i>Escherichia coli</i> , O157:H7 <i>Escherichia coli</i> , other pathogenic <i>E. coli</i> including entero-toxicogenic, invasive, pathogenic, hemorrhagic, aggregative strains and shiga toxin positive strains	Pesticide-related illness and injury*	! Venezuelan equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)
Giardiasis*	! Plague	Vibriosis (Vibrio infections)*
! Glanders	! Poliomyelitis, paralytic and non-paralytic	! Viral hemorrhagic fevers (Ebola, Marburg, Lassa, Machupo)
Gonorrhea*	Psittacosis (Ornithosis)*	West Nile virus disease (neuroinvasive and non-neuroinvasive)*
	Q Fever*	Western equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)*
	☎ Rabies (human, animal)	! Yellow fever

You are an invaluable part of Florida's disease surveillance system.

For more information, please call the epidemiology unit at your local county health department or the Bureau of Epidemiology, Florida Department of Health (FDOH): 850-246-4401 or visit http://www.doh.state.fl.us/disease_ctrl/epi/topics/surv.htm

**Section 381.001(1)(a), Florida Statute provides that "Any practitioner, licensed in Florida to practice medicine, osteopathic medicine, chiropractic, naturopathy, or veterinary medicine, who diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health." The FDOH county health departments serve as the Department's representative in this reporting requirement. Furthermore, this Section provides that "Periodically the Department shall issue a list of diseases determined by it to be of public health significance... and shall furnish a copy of said list to the practitioners..."

