

EpiTimes Volume 7 Issue 5

Salmonella and Food

You may know that *Salmonella* can contaminate poultry and eggs, but it also sneaks its way into many other foods. Learn what you can do to make your food safer to eat.

Salmonella is a bacteria that commonly causes foodborne illness, sometimes called "food poisoning." CDC estimates *Salmonella* causes 1 million foodborne illnesses every year in the United States. During the past few years, outbreaks of *Salmonella* illness have been linked to contaminated cucumbers, chicken, eggs, pistachios, raw tuna, sprouts, and many other foods.

Five Facts That May Surprise You

Don't let *Salmonella* make you or your loved ones sick. Learn these five facts – and tips for lowering your chance of getting a *Salmonella* infection.

- 1. You can get a Salmonella infection from a variety of foods. Salmonella can be found in many foods including beef, chicken, eggs, fruits, pork, sprouts, vegetables, and even processed foods, such as nut butters, frozen pot pies, chicken nuggets, and stuffed chicken entrees. When you eat a food that is contaminated with Salmonella, it can make you sick. Contaminated foods usually look and smell normal, which is why it is important to know how to prevent Salmonella infection.
- 2. Salmonella illness is more common in the summer. Warmer weather and unrefrigerated foods create ideal conditions for Salmonella to grow. Be sure to refrigerate or freeze perishables (foods likely to spoil or go bad quickly), prepared foods, and leftovers within 2 hours. Chill them within 1 hour if the temperature is 90°F or hotter.
- 3. Salmonella illness can be serious and is more dangerous for certain people. Symptoms of infection usually appear 6–48 hours after eating a contaminated food, but can take much longer. These symptoms include diarrhea, fever, and stomach cramps. In most cases, illness lasts 4–7 days and people recover without antibiotic treatment. Some people may have severe diarrhea and need to be hospitalized. Anyone can get a Salmonella infection, but some groups are more likely to develop a serious illness: older adults, children younger than 5, and people with immune systems weakened from medical conditions, such as diabetes, liver or kidney disease, and cancer or their treatment.
- 4. *Salmonella* causes far more illnesses than you might suspect. For every one case of *Salmonella* illness confirmed by laboratory tests, there are about 30 more cases of *Salmonella* illnesses that are not Most people who get food poisoning usually do not go to the doctor or submit a sample to a laboratory, so we never learn what germ made them sick.
- 5. To avoid *Salmonella*, you should not eat raw eggs or eggs that have runny whites or yolks. *Salmonella* can contaminate eggs, even perfectly normal-looking ones. But these eggs can make you sick, especially if they are raw or lightly cooked. <u>Eggs are safe when you cook and handle them properly</u>.

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Salmonella and Food, continued

Check Your Steps

Remember to follow the <u>Clean, Separate, Cook, and Chill</u> guidelines to help keep you and your family safe from food poisoning. Be especially careful to follow the guidelines when preparing food for young children, pregnant women, people with weakened immune systems, and older adults.

Clean

- Wash hands with warm, soapy water for 20 seconds before and after handling uncooked eggs, or raw meat, poultry, and seafood and their juices.
- Wash utensils, cutting boards, dishes, and countertops with hot, soapy water after preparing each food item and before you go on to prepare the next item.
- Don't wash raw poultry, meat, and eggs before cooking. Germs can spread to other foods, utensils, and surfaces.
- Sanitize food contact surfaces with a freshly made solution of one tablespoon of unscented, liquid chlorine bleach in one gallon of water.

Separate

- Keep raw meat, poultry, seafood, and eggs separate from other foods in your grocery cart and in your refrigerator. Keep eggs in the original carton and store them in the main part of the refrigerator, not in the door.
- Keep raw meat, poultry, and seafood separate from ready-to-eat foods, such as salads and deli meat.
- Use separate cutting boards and plates for produce and for raw meat, poultry, seafood, and eggs.
- Never place cooked food on a plate that previously held raw meat, poultry, seafood, or eggs.

Cook

- Use a food thermometer to ensure that foods are cooked to a safe internal temperature:
 - ♦ 145°F for beef, yeal, lamb, and fish (let the meat rest for 3 minutes before carving or eating)
 - ♦ 145°F for pork and ham (let the meat rest for 3 minutes before carving or eating)
 - ♦ 160°F for ground beef, ground pork, ground veal, and ground lamb
 - ♦ 160°F for egg dishes
 - ♦ 165°F for poultry (chicken, turkey, duck), including ground chicken and ground turkey
 - ♦ 165°F for casseroles
 - ♦ Microwave food to 165°F or above.

Chill

- Keep your refrigerator at 40°F or colder.
- Refrigerate or freeze perishables, prepared foods, and leftovers within 2 hours (or 1 hour if the temperature is 90°F or hotter).

Health and Agriculture Officials Urge Mosquito-Borne Illness Awareness

Tallahassee, **Fla.** — The Florida Department of Health is advising residents there has been an increase in mosquito-borne disease activity in several counties across the state. Although no human cases have been reported, several horses and emus have tested positive for Eastern equine encephalitis (EEE) virus. West Nile virus (WNV) and St. Louis encephalitis (SLE) virus are also present in mosquitoes in Florida. The risk of disease transmission through bites of infected mosquitoes to humans has increased.

The department recommends the following tips for residents and visitors:

- Avoid being bitten by mosquitoes and take basic precautions to help limit exposure.
- Be aware that emus infected with EEE virus can also potentially expose owners and other animals who are in direct contact with their feces, meat, organs, blood and bodily tissues. Please contact your veterinarian or county health department for information on how to safely handle potentially infected emus.
- Some wildlife can also be infected with EEE or other mosquito-borne viruses. Do not harvest wild game that appears sick, wear gloves when dressing or preparing meat from carcasses of healthy appearing game, and cook meat well.
- For information on how to prevent EEE virus infection in horses, emus and camelids (alpacas and llamas, etc.) though vaccination, please consult with your veterinarian, or the University of Florida College of Large Animal Medicine.
- If you suspect your animal has EEE, consult your veterinarian.
- EEE is a reportable animal disease. Animals suspected or confirmed with the virus must be reported to the Florida Department of
 Agriculture and Consumer Services, Division of Animal Industry. For more information about the EEE virus or how to report, visit
 the Division of Animal Industry website at, https://www.freshfromflorida.com/Divisions-Offices/Animal-Industry.

To protect yourself from mosquitoes, you should remember to "Drain and Cover":

DRAIN standing water weekly to stop mosquitoes from multiplying.

- Drain water from garbage cans, house gutters, buckets, pool covers, coolers, toys, flower pots or any other containers where sprinkler or rain water has collected.
- Discard old tires, drums, bottles, cans, pots and pans, broken appliances and other items that aren't being used.
- Empty and clean birdbaths and pet's water bowls at least once or twice a week.
- Protect boats and vehicles from rain with tarps that don't accumulate water.
- Maintain swimming pools in good condition and appropriately chlorinated. Empty plastic swimming pools when not in use.

COVER skin with clothing or repellent.

- Clothing Wear shoes, socks, and long pants and long-sleeves. This type of protection may be necessary for people who must work in areas where mosquitoes are present.
- Repellent Apply mosquito repellent to bare skin and clothing.
 - Always use repellents according to the label. Repellents with DEET, picaridin, oil of lemon eucalyptus, para-menthanediol, and IR3535 are effective.
 - Use mosquito netting to protect children younger than 2 months old.
 - Permethrin insecticide can also be applied to clothing and gear (but not skin)

Mosquito-Borne Illness Awareness, continued

Tips on Repellent Use

- Always read label directions carefully for the approved usage before you apply a repellent. Some repellents are not suitable for children.
- Products with concentrations of up to 30 percent DEET (N, N-diethyl-m-toluamide) are generally recommended. Other U.S.
 Environmental Protection Agency-approved repellents contain picaridin, oil of lemon eucalyptus, para-menthane-diol, or IR3535.
 These products are generally available at local pharmacies. Look for active ingredients to be listed on the product label.
- Apply insect repellent to exposed skin, or onto clothing, but not under clothing.
- In protecting children, read label instructions to be sure the repellent is age-appropriate. According to the Centers for Disease Control and Prevention (CDC), mosquito repellents containing oil of lemon eucalyptus should not be used on children under the age of three years. DEET is not recommended on children younger than two months old.
- Avoid applying repellents to the hands of children. Adults should apply repellent first to their own hands and then transfer it to the child's skin and clothing.
- If additional protection is necessary, apply a permethrin repellent directly to your clothing. Again, always follow the manufacturer's directions.

COVER doors and windows with screens to keep mosquitoes out of your house.

Repair broken screening on windows, doors, porches, and patios.

For more information on what repellent is right for you, see: www.epa.gov/insect-repellents

The department continues to conduct statewide surveillance for mosquito-borne illnesses, including West Nile virus infections, Eastern equine encephalitis, St. Louis encephalitis, malaria, chikungunya and dengue. Residents of Florida are encouraged to report dead birds via the Florida Fish and Wildlife Conservation Commission's site www.mvfwc.com.

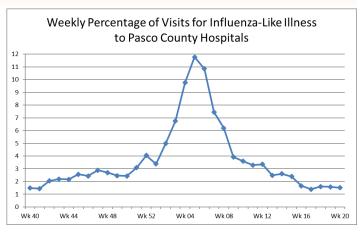
For more information about mosquito-borne diseases including current surveillance data, visit DOH's website at www.floridahealth.gov/diseases-and-conditions/mosquito-borne-diseases or contact your county health department.

Information from the Florida Department of Agriculture and Consumer Services (FDACS) about equine infection with EEE and WNV can be found at: www.freshfromflorida.com/Divisions-Offices/Animal-Industry/Agriculture-Industry/Horse-Equine/Florida-s-Reportable-Equine-Disease-Map/Eastern-Equine-Encephalitis.

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 format during the summer months on a biweekly basis. RSV surveillance information will continue to be included in these biweekly reports. Surveillance for influenza will continue during the summer months with a focus on identification of outbreaks and unusually severe presentations of influenza or ILI.



- The influenza season is coming to a close. Statewide, influenza and ILI activity continued to decrease and remained at normal levels for this time. While activity has declined overall, it is important to note that influenza continues to circulate at low levels throughout the summer months in Florida and may cause outbreaks.
- Data indicate influenza activity this season peaked during week 5 (ending February 3, 2018). Peak influenza activity this season was higher than in past flu seasons.
- No new influenza-associated pediatric deaths were confirmed in week 20. Eight influenza-associated pediatric deaths have been confirmed since the start of the 2017-18 influenza season. The number of confirmed influenza-associated pediatric deaths ranged from three to 11 during the last five flu seasons.
- Deaths due to pneumonia and influenza (P&I) were below expected levels. Deaths due to P&I also peaked during week 5.
- Two outbreaks of influenza or ILI were reported in week 20: one with laboratory confirmation of influenza and one ILI. A total of 507 outbreaks of influenza and ILI have been reported since the start of the 2017-18 season. More outbreaks were reported this season than in previous seasons on record. An average of 91 total influenza or ILI outbreaks were reported during the last five seasons.
- In week 20, two cases of intensive-care unit patients aged <65 years with laboratory-confirmed influenza were reported; 378 cases have been reported since February 1, 2018.
 - Of the 242 cases with known vaccination status, the majority (69%) were unvaccinated individuals. Of the 374 cases with medical histories available, the majority (89%) had underlying medical conditions.

Prevention and Treatment:

- Timely use of antivirals remains important throughout the summer months for unusually severe presentations of influenza and for people at higher risk for complications with suspect influenza. A Centers for Disease Control and Prevention (CDC) health advisory stresses the importance of rapid and early antiviral treatment this season. Visit: http://www.floridahealth.gov/diseases-and-conditions/influenza/documents/cdc-han-influenza-12-27-2017.pdf.
- 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.

National influenza activity:

- Influenza activity decreased and remained below the national baseline.
- As in Florida, influenza A (H3) has been the most common strain of influenza identified for the season; however, influenza B viruses have been more frequently reported than influenza A viruses since early March.
 - This late-season circulation of influenza B is expected.

Florida Arbovirus Surveillance

Andrea Morrison, PhD, MSPH, Dana Giandomenico, MPH, 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.

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 June 3-9, 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. One sentinel chicken tested positive for antibodies to WNV this week in Sarasota County. In 2018, positive samples from twenty-seven sentinel chickens have been reported from six 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. An outbreak of EEEV in a flock of emus was reported this week in Okeechobee County. Six horses with EEEV infection were reported this week in Columbia, Lake, Nassau (2), Seminole, and St. Johns counties. One sentinel chicken tested positive for antibodies to EEEV this week in Nassau County. In 2018, positive samples from twenty-three horses, one mule, one owl, one emu, four emu flocks, one mosquito pool, and forty-six sentinel chickens have been reported from twenty counties.

International Travel-Associated Dengue Fever Cases: No cases of dengue fever were reported this week in persons that had international travel. In 2018, 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 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, 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 2018, no cases of locally acquired chikungunya fever have been reported.

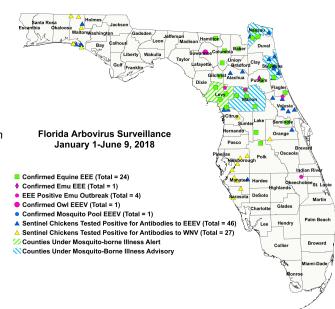
International Travel-Associated Zika Fever Cases: Three cases of Zika fever were reported this week in persons that had international travel. In 2018, 47 cases have been reported.

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

Advisories/Alerts: Marion, Nassau, and St. Johns counties are currently under a mosquito-borne illness advisory. Levy 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 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. 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.



	May		YTD	
Epidemiology Disease Summary	2018	2017	2018	2017
CNS Diseases and Bacteremias	2010	2017	2010	2017
Creutzfeldt-Jacob Disease (CJD)	-	_	_	-
Haemophilus influenzae	3	1	7	4
·			3	2
Legionellosis	1	1		4
Meningitis, Bacterial or Mycotic	-		1	
Meningococcal Disease	-	1	-	1
S. aureus Infection, Intermediate Resistance to Vancomycin (VISA)	-	-	-	-
Strep pneumoniae Invasive Disease, Drug-Resistant	1	-	2	-
Strep pneumoniae Invasive Disease, Drug-Susceptible	-	-	4	4
Enteric Infections				
Campylobacteriosis	15	14	58	39
Cholera (Vibrio cholerae Type O1)	-	-	-	-
Cryptosporidiosis	1	2	4	3
Cyclosporiasis	-	-	-	-
Escherichia coli Shiga Toxin-Producing (STEC)	3	-	9	3
Giardiasis	1	2	6	10
Hemolytic Uremic Syndrome (HUS)	-	-	-	1
Listeriosis	-	-	-	-
Salmonellosis	8	9	33	32
Shigellosis	1	6	9	12
Typhoid Fever	<u>'</u>	-	3	-
Vibriosis		_	-	2
	-	_	-	2
Vaccine Preventable Diseases				
Measles	-	-	-	-
Mumps	-	-	1	-
Pertussis	-	-	3	1
Varicella	2	1	8	5
Vector Borne, Zoonoses				
Brucellosis	-	-	-	-
Chikungunya Fever	-	-	-	-
Eastern Equine Encephalitis Neuroinvasive Disease	-	-	-	-
Ehrlichiosis/Anaplasmosis	-	-	-	-
Herpes B Virus, Possible Exposure	-	-	2	-
Lyme Disease	-	-	3	1
Malaria	_	_	_	-
Rabies, Animal	1	_	1	-
Rabies, Possible Exposure	10	5	87	39
Rocky Mountain Spotted Fever and Rickettsiosis	-	-	1	
West Nile Virus Neuroinvasive Disease				-
	-	-	- 1	-
Zika Virus Disease and Infection	-	-	1	-
Viral Hepatitis	_	_		_
Hepatitis A	4	1	19	1
Hepatitis B, Acute	3	8	17	21
Hepatitis B, Chronic	9	5	45	48
Hepatitis B, Surface Antigen in Pregnant Women	1	1	5	3
Hepatitis C, Acute	2	3	8	8
Hepatitis C, Chronic	95	72	438	378
Hepatitis C, Perinatal	-	-	2	-
Hepatitis D	-	_	2	-
Other				
Carbon Monoxide Poisoning	1	1	2	3
Hansen's Disease (Leprosy)	-	-	-	1
	-			- 1
Influenza-Associated Pediatric Mortality	-	- 7	- /2	1 /
Lead Poisoning	26	7	62	14
Mercury Poisoning	-	-	l -	1
Perticide Pelated Illness and Injury				
Pesticide-Related Illness and Injury Total	188	- 141	- 846	- 641

STD Morbidity Statistics

- Chlamydia = 139
- Gonorrhea = 40
- Syphilis = 3
- HIV = 4

A person with primary syphilis generally has a sore or sores at the original site of infection. These sores usually occur on or around the genitals, around the anus or in the rectum, or in or around the mouth. These sores are usually (but not always) firm, round, and painless.

HIV Outreach Statistics

- 85 individuals were tested for HIV
- 0 individuals were tested for Syphilis
- 52 rapid Hepatitis tests performed



Jail Linkage Statistics

- 57 rapid HIV tests performed (0 positive)
- 41 Hepatitis tests performed (12 positive)
- 57 individuals were HIV post-test counseled

Tuberculosis & Refugee Health Statistics

- 4 TB cases
- 2 Suspect cases
- 6 LTBI clients
- 0 new refugees
- 0 Follow up immunization visits

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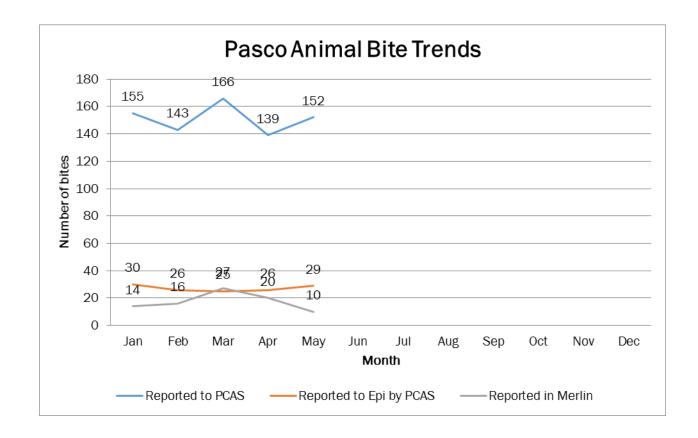






Animal Bites

- Pasco County Animal Services (PCAS) received 152 animal bites in May
- PCAS reported 29 of 152 (19%) cases to PCHD for follow-up
- 10 of 29 (34%) were reported in Merlin after meeting case definition
- DOH Pasco sent 7 animal specimens for rabies testing (1 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.











Hickory Harvest Recalls Certain Island Fruit Mix and Organic Nut Mix Products Because of Possible Health Risk

FOR IMMEDIATE RELEASE — May 10, 2018 — Hickory Harvest Foods of Akron, Ohio is voluntarily recalling specific lots due to the potential exposure to *Listeria monocytogenes*. *Listeria monocytogenes*, an organism which can cause serious and sometimes fatal infections in young children, frail or elderly people, pregnant women, and others with weakened immune systems. Healthy individuals may experience short-term symptoms such as high fever, severe headache, stiffness, nausea, abdominal pain, and diarrhea. Listeria infection can also cause miscarriages, stillbirths, and fetal infection in pregnant women. People experiencing these problems should seek immediate medical attention.

Items include:

- 9 oz. Island Fruit Mix in a plastic resealable bag
- · 9 oz. Organic Nut Mix in our plastic deli tubs
- · 1.3 oz. Raw Almonds in plastic tube nut bag
- · 1.6 oz. Almond Raisin Mix in plastic tube nut baq
- 1 oz. Natural Pistachios in plastic tube nut baq
- · 1.2 oz. Honey Cashews in plastic tube nut bag

There have been no reported consumer illnesses to date in association with this product. This recall was initiated after Hickory Harvest staff performed routine in house environmental testing, the presence of *Listeria monocytogenes* on a piece of production equipment.

These items were sold at Liberty Snacks, Heinens, Pilot Flying J, Travel Centers, Diamond Gasoline, and Petro locations in the following states: AL, AR, AZ, CA, CO, CT, FL, GA, IA, IL, IN, KS, KY, LA, MD, MI, MO, NC, ND, NE, NV, NY, OH, OK, OR, PA, SC, TN, TX, UT, VA, WA, WY.

No other Hickory Harvest Foods products are impacted by this voluntary recall.

The following products are included in this product recall:

ITEM UPC	ITEM DESCRIPTION	LOT NUMBERS
0-36232-06052-9	Hickory Harvest: Island Fruit Mix	032019
0-36232-01871-1	Heinens: Organic Nut Mix	031919
8-04879-17157-7	Liberty Snacks: Raw Almonds	031919
8-04879-17158-4	Liberty Snacks: Almond Raisin Mix	032019
8-04879-17158-4	Liberty Snacks: Natural Pistachios	032019
8-04879-17154-4	Liberty Snacks: Honey Cashews	032119

Hickory Harvest Foods is recalling this product as a reflection of the organization's commitment to product quality and consumer safety. Consumers with additional questions can contact Customer Service at Hickory Harvest Foods by calling 330-644-6266 Monday through Friday 8:00 am to 4:00 pm Eastern Standard Time.

Hickory Harvest Foods: Island Fruit Mix—The lot number is the best if purchased by date 03/20/19, located on the back of the bag. Consumers that have any of these bags, please dispose of your product.

Heinens: Organic Nut Mix—The lot number is the best if purchased by date 03/19/19, located on the bottom of the tub. Consumers that have any of these bags, please dispose of your product.

Liberty Snacks: Raw Almonds—The lot number is the Best By: 03/19/19, located on the front of the bag. Consumers that have any of these bags, please dispose of your product.

Liberty Snacks: Almond Raisin Mix—The lot number is the Best By: 03/20/19, located on the front of the bag. Consumers that have any of these bags, please dispose of your product.

Liberty Snacks: Natural Pistachios—The lot number is the Best By: 03/20/19, located on the front of the bag. Consumers that have any of these bags, please dispose of your product.

Liberty Snacks: Honey Cashews—The lot number is the Best By: 03/21/19, located on the front of the bag. Consumers that have any of these bags, please dispose of your product

Ziyad Brothers Importing Recalls Tahini Because of Possible Health Risk

FOR IMMEDIATE RELEASE — May 18, 2018 — Ziyad Brothers Importing is voluntarily recalling certain lot codes of Ziyad Brand Tahini because it has 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 systems. Healthy persons infected with *Salmonella* often experience fever, diarrhea, 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 and is sold in 8, 16, and 32 ounce and half gallon jars. The jars are labelled "Tahini Sesame Paste." Lot codes and use by/expiration dates are printed on the white jar cap.

Product code, description, lot code, and UPC information (use by/expiration dates vary):

PRODUCT CODE	PRODUCT DESCRIPTION & SIZE	LOT#	UPC	
A0071	Ziyad Tahini Sesame Paste 1/2 gal Glass Jar	35417	074265003076	
A0072	Ziyad Tahini Sesame Paste 32 oz Glass Jar	00318	074265001553	
A0073	Ziyad Tahini Sesame Paste 16 oz Glass Jar	35317	074265001560	
		35417		
		35517		
		35617		
A0076	Ziyad Tahini Sesame Paste 8 oz Glass Jar	34817	074265010975	
		01218		
S0073	Ziyad Tahini Sesame Paste 16 oz Glass Jar	34917	074265001560	

No illnesses have been reported to-date in connection with the Ziyad Brand Tahini.

This potential problem was revealed as a result of a random sampling by the Michigan Department of Agriculture and Rural Development. Although we have not received the final laboratory reports, Ziyad Brothers is taking the precaution of recalling product with the lot codes listed above.

Consumers who have purchased Ziyad Brand Tahini with these lot codes should discontinue use and return it to the store of purchase for a full refund. Retailers that may have further distributed the recalled lot codes should share this notice with their customers. Retailers or consumers with questions may contact Recall Coordinator Ray Hanania at 708-298-3818





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Staff News and Upcoming Events

Free Test Fridays

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

1st Friday – Little Road Health Department 9 am to 3 pm

2nd Friday – Dade City Health Department 10 am to 3 pm

3rd Friday – Wesley Chapel Health Department 10 am to 3 pm

4th Friday – Main Street Health Department 12 noon to 4 pm

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/SD3R5QN

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

Submit a Case for Consultation Online

(844) HEP-INFO or (844) 437-4636

For non-urgent HCV management consultation

Monday-Friday, 9 a.m.—8 p.m. EST

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



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 toxinproducing
- 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</p>
- 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)
- ! Tularemi
- 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