

September 2016 Surveillance Report

CDC recommends only two HPV shots for younger adolescents

FOR IMMEDIATE RELEASE—Wednesday October 19, 2016—CDC today recommended that 11- to 12-year-olds receive two doses of HPV vaccine at least six months apart rather than the previously recommended three doses to protect against cancers caused by human papillomavirus (HPV) infections. Teens and young adults who start the series later, at ages 15 through 26 years, will continue to need three doses of HPV vaccine to protect against cancer-causing HPV infection.

"Safe, effective, and long-lasting protection against HPV cancers with two visits instead of three means more Americans will be protected from cancer," said CDC Director Tom Frieden, M.D., M.P.H. "This recommendation will make it simpler for parents to get their children protected in time."

The Advisory Committee on Immunization Practices (ACIP) voted today to recommend a 2-dose HPV vaccine schedule for young adolescents. ACIP is a panel of experts that advises the CDC on vaccine recommendations in the United States. CDC Director Frieden approved the committee's recommendations shortly after the vote. ACIP recommendations approved by the CDC Director become agency guidelines on the date published in the Morbidity and Mortality Weekly Report (MMWR).

CDC and ACIP made this recommendation after a thorough review of studies over several meetings. CDC and ACIP reviewed data from clinical trials showing two doses of HPV vaccine in younger adolescents (aged 9-14 years) produced an immune response similar or higher than the response in young adults (aged 16-26 years) who received three doses.

Generally, preteens receive HPV vaccine at the same time as whooping cough and meningitis vaccines. Two doses of HPV vaccine given at least six months apart at ages 11 and 12 years will provide safe, effective, and long-lasting protection against HPV cancers. Adolescents ages 13-14 are also able to receive HPV vaccination on the new 2-dose schedule.

CDC will provide guidance to parents, healthcare professionals, and insurers on the change in recommendation. On October 7, 2016, the U.S. Food and Drug Administration (FDA) approved adding a 2-dose schedule for 9-valent HPV vaccine (Gardasil® 9) for adolescents ages 9 through 14 years. CDC encourages clinicians to begin implementing the 2-dose schedule in their practice to protect their preteen patients from HPV cancers.

ACIP, CDC, FDA and partners monitor vaccines in use in the U.S. year-round. These updated recommendations are an example of using the latest available evidence to provide the best possible protection against serious diseases.

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CDC updates guidance related to local Zika transmission in Miami-Dade County, Florida

The Centers for Disease Control and Prevention (CDC) continues to work with Florida health officials to investigate new cases of locally transmitted Zika virus infection in Miami-Dade County, Florida. The Florida Department of Health (FLDOH) identified last week an additional area where local, state, and CDC officials have determined that the intensity of Zika virus transmission presents a significant risk to pregnant women. The designated location is a one-square mile area of Miami-Dade County (NW 79th St. to the north, NW 63rd St. to the south, NW 10th Ave. to the west and N. Miami Ave. to the east).

Because local spread of Zika virus continues to be reported in Miami-Dade County, CDC is strengthening its travel recommendations for pregnant women and also reinforcing recommendations for the use of protective measures to prevent exposure to Zika. CDC is also updating recommendations to emphasize testing for pregnant women who have lived in, traveled to, or had unprotected sex with someone who lived in or traveled to any area of Miami-Dade County. In addition, CDC has made specific recommendations for areas of identified active spread of Zika virus.

"Zika continues to pose a threat to pregnant women living in or traveling to Miami-Dade County," said Lyle Petersen, MD, MPH, Director, Division of Vector-Borne Diseases. "Our guidance today strengthens our travel advice and testing recommendations for pregnant women, to further prevent the spread of the infection among those most vulnerable."

CDC designates areas with Zika transmission as red or yellow

CDC defines two types of geographic areas within the continental United States and Hawaii to implement measures to prevent Zika virus transmission: Zika active transmission areas (designated as red) and Zika cautionary areas (designated as yellow).

- Zika active transmission area (red area): A geographic area where local, state, and CDC officials have determined that the intensity of Zika virus transmission presents a significant risk to pregnant women. The intensity of Zika virus transmission is determined by several factors, including geographic distribution of cases, number of cases identified, known or suspected links between cases and population density.
- Zika cautionary area (yellow area): A geographic area where local transmission has been identified, but evidence is lacking that the intensity of transmission is comparable to that in a red area. Although the specific level of risk in yellow areas is unknown, pregnant women are still considered to be at risk. Also, areas adjacent or close to red areas may have a greater likelihood of active spread of Zika virus and are considered to pose a risk to pregnant women.

Currently, a 4.5-square-mile area of Miami Beach and one-square-mile area in Little River located in Miami-Dade County (<u>http//</u><u>www.cdc.gov/zika/intheus/florida-update.html</u>) are red areas. The rest of Miami-Dade County is s a yellow area. Because this is an ongoing investigation, the designation of areas is likely to change over time. For the most up-to-date designation of red and yellow areas, check the CDC website on Florida's Zika situation: <u>http//www.cdc.gov/zika/intheus/florida-update.html</u>.

The updated recommendations for Miami-Dade County are as follows:

Travel Recommendations for Pregnant Women

- Pregnant women should consider postponing travel to yellow areas of Miami-Dade County.
- Pregnant women should specifically avoid travel to red areas (<u>http//www.cdc.gov/zika/intheus/florida-update.html</u>) because the intensity of Zika virus transmission confirmed in these areas is a significant risk to pregnant women.

Testing Recommendations for Pregnant Women

Pregnant women who have lived in, traveled to, or had unprotected sex with someone who lived in or traveled to Miami-Dade County since August 1, 2016, should be tested for Zika virus. Pregnant women who have lived in, traveled to, or had unprotected sex with someone who lived in or traveled to the 4.5-square-mile area of Miami Beach with active spread of Zika virus since July 14, 2016, should be tested for Zika virus (<u>http://www.cdc.gov/mmwr/volumes/65/wr/mm6529e1.htm?s_cid=mm6529e1_e</u>).

CDC updates guidance, continued

Women and men planning pregnancy

- Women and men who are planning pregnancy in the near future should consider avoiding nonessential travel to red areas.
- Women and men who have a link to a red area through residence, travel, or sex there, and who do not have ongoing risks from a continuing link to a red area should wait at least 8 weeks or 6 months, respectively, after symptoms start (if symptomatic) or last possible exposure (if no symptoms develop) before attempting conception.
- Women and men who have a link to a yellow area and who do not have ongoing risks from a continuing link to a yellow area
 may consider waiting at least 8 weeks or 6 months, respectively, after symptoms start (if symptomatic) or last possible exposure
 (without symptoms) before attempting conception. Although the level of risk in yellow areas is unknown, pregnant women are
 still considered to be at risk. Also, areas adjacent to or close to red areas may have a greater likelihood of active spread of Zika
 virus and are considered to pose a risk to pregnant women.
- People living in an area with possible Zika virus transmission should be counseled on the possible risk for Zika virus infection during the pre-conception period. Women and men should discuss their reproductive life plans with their healthcare provider given potential and ongoing Zika virus exposure. Women and men with ongoing risks for exposure who are diagnosed with Zika virus disease should wait at least 8 weeks and at least 6 months, respectively, after symptom onset before attempting conception.
- Given the limited available information about how long Zika virus can stay in body fluids and the chances of harm to a
 pregnancy when a woman is infected with Zika virus around the time of conception, some couples in which one or both
 partners have had a possible Zika virus exposure may choose to wait longer or shorter than the recommended period to
 conceive, depending on individual circumstances like age, fertility, and the details of possible exposure, and their risk tolerance.

Other recommendations to prevent or identify Zika virus infection

Women and men who live in or traveled to Miami-Dade County should be aware of active Zika virus transmission. Those who are pregnant or have a pregnant sex partner should consistently and correctly use condoms to prevent Zika virus infection during sex or should not have sex during the pregnancy.

Pregnant women and their partners living in or traveling to the Miami-Dade County should be aware of active Zika virus transmission and should strictly follow steps to prevent mosquito bites. (<u>http://www.cdc.gov/zika/prevention/prevent-mosquito-bites.html</u>).

Depending on local circumstances, public health officials may implement additional Zika-related interventions (such as testing of non -pregnant people with symptoms).

For more information about Zika: http://www.cdc.gov/zika/.

Source: <u>CDC</u>

Florida Arbovirus Surveillance

Andrea Bingham, PhD, MSPH, Shaiasia Itwaru-Womack, MPH, and Danielle Stanek, DVM, DOH Bureau of Epidemiology; Lea Heberlein-Larson, Lylah Seaton, 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 September 25-October 1, 2016 the following arboviral activity was recorded in Florida.

WNV activity: Two human cases of WNV infection were reported this week in Bay and Escambia Counties. No horses with WNV infection were reported this week. Thirteen sentinel chickens tested positive for antibodies to WNV this week in Lee, Leon, Manatee, Nassau, Putnam, Sarasota, St. Johns, and Walton Counties. In 2016, positive samples from 133 sentinel chickens, six humans, one horse, and five mosquito pools have been received from 21 counties.

SLEV activity: No human cases of SLEV infection were reported this week. One sentinel chicken tested positive for antibodies to SLEV this week in Brevard County. In 2016, five positive samples from sentinel chickens have been received from two counties.

EEEV activity: No human cases of EEEV infection were reported this week. No horses with EEEV infection were reported this week. Four sentinel chickens tested positive for antibodies to EEEV this week in Alachua, Citrus, Flagler, and Nassau. In 2016, positive samples from 79 sentinel chickens and 20 horses have been received from 22 counties.

International Travel-Associated Dengue Fever Cases: No new cases of dengue fever were reported this week in persons that had international travel. In 2016, 40 travel-associated cases have been reported.

Dengue Fever Cases Acquired in Florida: One case of locally acquired dengue fever was reported this week in Miami-Dade County. In 2016, two cases of locally acquired dengue fever has been reported.

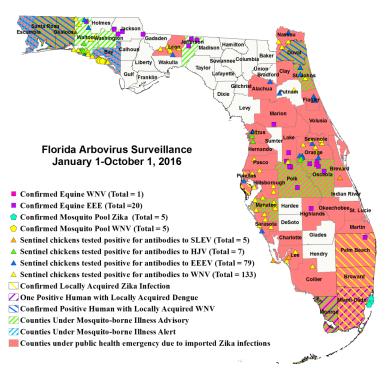
International Travel-Associated Chikungunya Fever Cases: No cases of chikungunya fever were reported this week. In 2016, six travel -associated cases have been reported.

Chikungunya Fever Cases Acquired in Florida: No cases of locally acquired chikungunya fever were reported this week. In 2016, no cases of locally acquired chikungunya fever have been reported.

International Travel-Associated Zika Fever Cases: Forty-one cases of Zika fever were reported this week in persons that had international travel. In 2016, 783 travel-associated cases have been reported.

Zika Fever Cases Acquired in Florida: Twenty-eight cases of Zika fever were reported this week in persons that had no international travel. In 2016, 133 local cases have been reported.

Advisories/Alerts: Bay and Escambia Counties are currently under mosquito-borne illness alert. Duval, Jefferson, Manatee, Monroe, Polk, Okaloosa, Osceola, St. Johns, Santa Rosa, Walton, and Washington Counties are currently under mosquito-borne illness advisory. Thirty-seven counties are currently under a declared public health emergency due to the identification of travel-associated Zika infections: Alachua, Bay, Brevard, Broward, Charlotte, Citrus, Clay, Collier, Duval, Escambia, Flagler, Hernando, Highlands, Hillsborough, Lake, Lee, Leon, Manatee, Marion, Martin, Miami-Dade, Monroe, Nassau, Okaloosa, Okeechobee, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, St. Johns, St. Lucie, Santa Rosa, Sarasota, Seminole, and Volusia Counties.



September 2016 Surveillance R			nce Repor	
Epidemiology Disease Summary	Septe	September YTD		D
	2016	2015	2016	2015
CNS Diseases and Bacteremias				
Creutzfeldt-Jacob Disease (CJD)	-	-	-	1
Haemophilus influenzae	_	-	6	1
Legionellosis	-	1	6	6
Listeriosis	-	-	-	1
Meningitis, Bacterial or Mycotic	-	3	2	6
Meningococcal Disease	1	-	1	-
S. aureus Infection, Intermediate Resistance to Vancomycin (VISA)	-	-	1	-
Strep pneumoniae Invasive Disease, Drug-Resistant	-	-	2	1
Strep pneumoniae Invasive Disease, Drug-Susceptible	_	-	14	4
Enteric Infections				
Campylobacteriosis	5	7	68	77
Cholera (Vibrio cholerae Type O1)	-	-	-	-
Cryptosporidiosis	_	8	7	24
Cyclosporiasis	_	-	3	-
Escherichia coli Shiga Toxin-Producing (STEC)	3	-	13	8
Giardiasis	-	1	11	15
Hemolytic Uremic Syndrome (HUS)	-	-	-	1
Salmonellosis	31	17	95	97
Shigellosis	6	3	16	12
Typhoid Fever	_	-	-	-
Vibriosis	1	-	3	2
/accine Preventable Diseases				
Measles	-	-	-	-
Mumps	-	-	-	1
Pertussis	1	-	12	13
Varicella	3	2	8	21
/ector Borne, Zoonoses				
Chikungunya Fever	_	-	-	-
Eastern Equine Encephalitis Neuroinvasive Disease	1	-	1	-
Ehrlichiosis/Anaplasmosis	1	-	1	1
Lyme Disease	3	-	8	5
Malaria	-	-	-	-
Rabies, Animal	-	-	2	1
Rabies, Possible Exposure	9	11	109	146
Rocky Mountain Spotted Fever and Rickettsiosis	-	-	-	-
West Nile Virus Neuroinvasive Disease	_	-	-	-
Zika Virus Disease and Infection	1	-	8	-
/iral Hepatitis				
Hepatitis A	-	-	3	4
Hepatitis B, Acute	8	9	73	54
Hepatitis B, Chronic	6	7	71	74
Hepatitis B, Surface Antigen in Pregnant Women	-	-	6	8
Hepatitis C, Acute	2	-	20	4
Hepatitis C, Chronic	85	64	885	660
Other				
Carbon Monoxide Poisoning	2	-	7	2
Influenza-Associated Pediatric Mortality	-	-	-	-
Lead Poisoning	4	3	26	26
Mercury Poisoning	-	-	1	-
Pesticide-Related Illness and Injury	_	-	1	-
otal	173	136	1491	1276

STD Morbidity Statistics

- Chlamydia = 80
- Gonorrhea = 23
- Syphilis = 3
- HIV = 2

HIV Outreach Statistics

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



Gonorrhea has

to the antibiotic

treatment

developed resistance

drugs prescribed for

progressively

Current HIV Infection data by year of report reflects any case meeting the CDC definition of 'HIV infection' which includes all newly reported HIV cases and newly reported AIDS cases with no previous report of HIV in Florida. If a case is later identified as being previously diagnosed and reported from another state, the case will no longer be reflected as a Florida case and the data will be adjusted accordingly. Data from the most recent calendar year (2015) are considered provisional and therefore should not be used to confirm or rule out an increase in newly reported cases in Florida. The final year-end numbers are generated in July of the following year, after duplicate cases are removed from the dataset, as is customary of HIV surveillance in the US.

Jail Linkage Statistics

- 6 rapid HIV tests performed (0 positive)
- 4 Hepatitis tests performed (1 positive)
- 4 RPR tests performed (0 positive)
- 2 Gonorrhea/Chlamydia tests performed (0 positive)
- 6 individuals were HIV post-test counseled

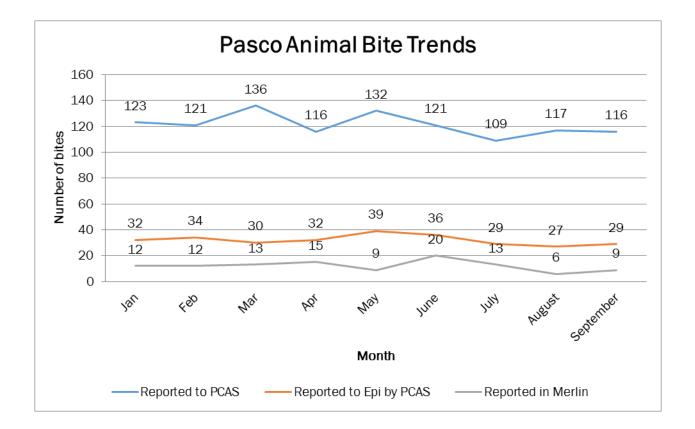
Tuberculosis/Refugee Statistics

- 5 TB cases
- 3 Suspect cases
- 15 LTBI clients
- 18 new (0 no shows) refugees
- 21 Follow up immunization visits



Animal Bites

- Pasco County Animal Services (PCAS) received 116 animal bites in September
- PCAS reported 29 of 116 (25%) cases to PCHD for follow-up
- 9 of 29 (31%) were reported in Merlin after meeting case definition
- DOH Pasco sent 6 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.



Asher's Chocolates/Lewistown, Inc. Issues Voluntary Recall of Candy Products Health Risk

FOR IMMEDIATE RELEASE — September 2, 2016 — Asher's Chocolates/Lewistown, Inc., an affiliated partner of Chester A. Asher Inc. ("Asher's") is initiating a voluntary recall of multiple chocolates, chocolate bars, cellophane wrapped chocolates, and individually wrapped chocolates, etc. under the Asher's brand due to possible *Salmonella* contamination of items produced in their Lewistown, PA facility distributed nationwide.

Salmonella is 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. Asher's Brand Products under this voluntary recall are:

PRODUCT UPC	LABEL DESCRIPTION	LOT#	SIZE
11516	Milk Chocolate Pretzel Pieces 8 oz.	000334469	8 oz.
11517	Dark Chocolate Pretzel Pieces 8 oz.	000334470	8 oz.
14765	Milk Chocolate Vanilla Caramel with Sea Salt 4 oz.	000337556	4 oz.
47350	Dark Chocolate Hostess Mint 6 oz.	000335615	6oz.
55115	KEYSTONE CRUNCH 4 OZ BAG	000336374, 000337658	4 oz.
55165	KEYSTONE CRUNCH 6 oz.	000335591	6 oz.
55180	Milk Chocolate Coated Boardwalk Crunch 4 oz.	000335625	4 oz.
55185	KEYSTONE CRUNCH 1 LB	000336375	16 oz.
63385	Milk Chocolate with Fall String 4 oz.	000335852	4 oz.
63386	Dark Chocolate mini Pretzels Fall String 4 oz.	000335848	4 oz.
65902	Dark Chocolate Molasses Pop 4 oz.	000336201, 000335800	4 oz.
65902	Dark Chocolate Molasses Pop 2 oz.	000336376	2 oz.
67395	Milk Chocolate Peanut Butter Heaven 3 oz.	000337016, 000337663	3 oz.
75005	Milk Chocolate Nonpareil Pop 1.25 oz.	000335701, 000336520	1.25 oz.
75027	Milk Chocolate Crisped Rice Pop with Fall Leaves 3 oz.	000337574, 000337673	3 oz.
75030	Milk Chocolate Crisped Rice Pop with Christmas Seeds 3 oz.	000336521	3 oz.
75037	Milk Chocolate Crisped Rice Pop Multi Seeds 2.25 oz.	000335803, 000337173	2.25 oz.
75085	Milk Chocolate Non Peril with Fall Seed 4 oz.	000335963	4 oz.
75086	Dark Chocolate Non Pareils with Fall Seed 4 oz.	000335858	4 oz.
75087	White Confectionery Coating Non pareils with orange and yellow seed 4 oz.	000337178	4 oz.
75107	White Confectionery Coating Peanut Butter Cup 2.35 oz.	000336377, 000337560, 000337665	2.35 oz.
75141	Milk Chocolate POTATO CHIP 4 oz.	000335918	4 oz.
75151	Milk Chocolate Coated Mini Pretzels 4 oz.	000335843, 000336481	4 oz.

Asher's Chocolates/Lewistown, Inc., continued

PRODUCT UPC	LABEL DESCRIPTION	LOT#	SIZE
75152	Dark Chocolate Coated Mini Pretzels 4 oz.	000335590, 000336482	4 oz.
75153	White Confectionery Coated Mini Pretzels 4 oz.	000335589	4 oz.
75245	Milk Chocolate Pretzel Rod 3pcs Asst. with Asher Bow 3.5 oz.	000335802, 000335910, 000336608, 000337177	3.5 oz.
75260	Milk Pretzel Rod 3 piece assorted 3.5 oz.	000335699, 000337664	3.5 oz.
75261	Milk Chocolate Pretzel Cluster 4 oz.	000335930, 000336198, 000336378, 000336879, 000337013	4 oz.
75277	Milk Chocolate Coated Potato Chip Coffee Bag 8.5 oz.	000336044	8.5 oz,
75279	Milk Boardwalk Crunch Coffee Bag 6 oz.	000335043	6 oz.
75282	Dark Chocolate costed POTATO CHIP COFFEE BAG 8.5 oz.	000335851	8.5 oz.
76025	Milk Chocolate Crisped Rice Pop Multi Seeds 3 oz.	000335722, 000337573, 000335462	3 oz.
82379	Milk SF Almond Butter Toffee 3 oz.	000335955	3 oz.
82421	Milk Chocolate Fruit Center Bar 3.5 oz.	000335414	3.5 oz.
83851	Dark Chocolate Almond Bark (Scored) 4 oz.	000335647, 000335856	4 oz.
83855	Milk Chocolate Non Pareils with multi seed 4 oz.	000335854	4 oz.
83856	Dark Chocolate Non Pareils with White Seed 4 oz.	000335855	4 oz.
83858	Milk Chocolate Mini Pretzels 4 oz.	000335588	4 oz.
83859	Dark Chocolate Mini Pretzel Ash Label 4 oz.	000335862	4 oz.
83860	White Confectionery Coated Mini Pretzels 4 oz.	000335969, 000337245	4 oz.
87145	Milk and Dark Chocolate Fall Pretzel Pre Pack 3 per case	000336450	4 oz.

The recalled items can be identified by the production code printed on the side of the label. No other production codes are affected by this recall.

No illnesses have been reported to date in connection with this problem. No products manufactured by C.A. Asher Inc./Asher's Chocolate Co. of Souderton PA are involved in this recall.

The recalled candy products were distributed nationwide in retail stores.

The potential for contamination was noted after a single sample from routine testing by the company revealed the presence of *Salmonella* in a group of products. "The safety and wellbeing of our customers is our primary concern, and we are taking this incident very seriously. In our 124 years of business, we have never previously detected Salmonella in our testing. We are working and cooperating fully with the U. S. Food & Drug Administration on this voluntary recall," said Jeff Asher, President and CEO. "We apologize to our retail customers and consumers and sincerely regret any inconvenience."

Consumers who may have purchased any product are urged not to consume it. Consumers should contact Customer Service to arrange for return of product and a refund. Customer Service can be contacted by email at <u>customerservice@lewistownashers.com</u> or by calling 888-288-3880 between 9AM and 5PM Eastern Time, Monday - Friday.

Island Soups Company, Inc. Recalls Six Varieties of Soup Products Health Risk

FOR IMMEDIATE RELEASE — September 7, 2016 — Island Soups Company, Inc. of Saint Albans, New York is recalling the following products because they have the potential to be contaminated with *Clostridium botulinum*, a bacterium which can cause life-threatening illness or death. Consumers are warned not to use these products.

GUNGO PEAS SOUP, NET WT. 16OZ GUNGO PEAS SOUP NO MEAT, NET WT. 16OZ RED PEAS SOUP, NET WT. 16OZ RED PEAS SOUP NO MEAT, NET WT. 16OZ MANNISH WATER, NET WT. 16OZ FISH SOUP, NET WT. 16OZ

All products are coded BEST BEFORE dates July 2015 through June 2018

Botulism, a potentially fatal form of food poisoning, can cause the following symptoms: general weakness, dizziness, double-vision, and trouble with speaking or swallowing. Difficulty in breathing, weakness of other muscles, abdominal distension and constipation may also be common symptoms. People experiencing these problems should seek immediate medical attention.

Products were distributed through internet website purchases.

The products are packaged in 16 oz. glass jars with white lids and a white plastic with brown lettering safety seal.

To date there have been no confirmed reports of illness and injury related to these products.

FDA inspection of the establishment reveals that the firm does not have valid process schedules or process documentation to ensure that these soups products have been sufficiently processed to prevent the growth of *Clostridium botulinum*.

Consumers should segregate and destroy any of the identified products.

Consumers with questions can call 917-991-6647, Monday through Friday, 8:30 am - 4:30 pm, EST

To view product photos, go here.



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 Epidemiology Staff: Armando Avellanet, DIS Deb Hensley, MPH, MHA Beri-Lynn Miller, RN Jennie Pell, MPH, CPH, CIC Zelda Young, DIS Stay tuned for our Quarterly Epi Newsletter published later this month!

Staff News and Upcoming Events

HIV Outreach participated in events at the Land O' Lakes Jail, Vine Church in Zephyrhills, First Presbyterian Church in Port Richey, Juvenile Detention Center in San Antonio, Loving Hands Ministries in Lacoochee, Farm Workers, Inc. in Dade City, BayCare Behavioral Health-Community Recovery Center in New Port Richey, New Hope Church, The Rope Center, Spirit of Life Church, and the Unity Festival in Shady Hills.

HIV Outreach and Disease Intervention Specialists provided STD, Hepatitis, and HIV screening as well as Hepatitis B vaccinations at the Veterans Stand-down on September 30.

Jennie Pell partnered with OSHA to present a Zika Virus and the Outdoor Worker Seminar on September 30.

Members of FDOH-Pasco will be providing free Hepatitis B vaccinations at Atonement Lutheran Church in Wesley Chapel on October 26.



Epidemiology supports National Breast Cancer Awareness Month.

Reportable Diseases/Conditions in Florida

Practitioner List (Laboratory Requirements Differ)

Effective June 4, 2014



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

- 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 2 Anthrax I Arsenic poisoning Arboviral diseases not otherwise listed Botulism, foodborne, wound, and unspecified Botulism, infant I **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
- 2 Chikungunya fever, locally acquired
- Chlamydia •
- T Cholera (Vibrio cholerae type O1)
- Ciguatera fish poisoning
- ÷ **Congenital anomalies**
- Conjunctivitis in neonates <14 days old
- Creutzfeldt-Jakob disease (CJD)
- Cryptosporidiosis
- Cyclosporiasis
- Dengue fever
- 2 Dengue fever, locally acquired
- Diphtheria
- Eastern equine encephalitis
- Ehrlichiosis/anaplasmosis
- Escherichia coli infection, Shiga toxinproducing
- Giardiasis, acute
- Glanders
- Gonorrhea

- Granuloma inguinale
- Haemophilus influenzae invasive 1 disease in children <5 years old
- Hansen's disease (leprosy)
- Hantavirus infection
- Hemolytic uremic syndrome (HUS)
- Hepatitis A
- Hepatitis B, C, D, E, and G
- Hepatitis B surface antigen in pregnant women or children <2 years old
- Herpes B virus, possible exposure
- Herpes simplex virus (HSV) in infants <60 days old with disseminated infection and liver involvement; encephalitis; and infections limited to skin, eyes, and mouth; anogenital HSV in children <12 years old
- Human immunodeficiency virus (HIV) +infection
- HIV, exposed infants <18 months old born to an HIV-infected woman
- Human papillomavirus (HPV), associated laryngeal papillomas or recurrent respiratory papillomatosis in children <6 years old; anogenital papillomas in children <12 years old
- Influenza A, novel or pandemic strains
- Influenza-associated pediatric mortality in children <18 years old
- Lead poisoning
- Legionellosis
- Leptospirosis
- Listeriosis
- Lyme disease
- Lymphogranuloma venereum (LGV)
- Malaria
- Measles (rubeola)
- Melioidosis
- Meningitis, bacterial or mycotic
- Meningococcal disease
- Mercury poisoning
- Mumps
- ÷ Neonatal abstinence syndrome (NAS)
- Neurotoxic shellfish poisoning
- **Pertussis** 2
- Pesticide-related illness and injury, acute

initial suspicion or laboratory test order Report immediately 24/7 by phone

Report immediately 24/7 by phone upon

- Report next business day
 - Other reporting timeframe
 - Plague 1 **Poliomvelitis** 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 2 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 2 neonates Tetanus **Trichinellosis (trichinosis) Tuberculosis (TB)** Tularemia Typhoid fever (Salmonella serotype Typhi) Typhus fever, epidemic
 - Vaccinia disease
 - Varicella (chickenpox)
 - Venezuelan equine encephalitis
 - Vibriosis (infections of Vibrio species and closely related organisms, excluding Vibrio cholerae type O1)
 - Viral hemorrhagic fevers
 - West Nile virus disease
 - **Yellow fever**

*Section 381.0031 (2), Florida Statutes (F.S.), provides that "Any practitioner licensed in this state to practice medicine, osteopathic medicine, chiropractic medicine, naturopathy, or veterinary medicine; any hospital licensed under part I of chapter 395; or any laboratory licensed under chapter 483 that diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health." Florida's county health departments serve as the Department's representative in this reporting requirement. Furthermore, Section 381.0031 (4), F.S. provides that "The department shall periodically issue a list of infectious or noninfectious diseases determined by it to be a threat to public health and therefore of significance to public health and shall furnish a copy of the list to the practitioners.

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