# Sentinel Provider Influenza-Like Illness (ILI) Surveillance Summary

for the Week of August 12-18, 2018 (Week 33)


## Influenza activity in Tennessee

- The percentage of outpatients with ILI visiting the state’s Sentinel clinic sites was 0.16%. The CDC’s baseline rate is 2.2%.
- No specimens tested positive for influenza viruses.
- 2 of 95 Tennessee counties have had at least one confirmed influenza-positive result in recent weeks.

## Summary for # Sites reporting Total Sites Total Regional ILI Total Regional Patients % ILI Compared to State

<table>
<thead>
<tr>
<th>Region</th>
<th># Sites</th>
<th>Total Sites</th>
<th>Regional ILI</th>
<th>Regional Patients</th>
<th>% ILI</th>
<th>Compared to State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hamilton County (Chattanooga)</td>
<td>2</td>
<td>4</td>
<td>2</td>
<td>163</td>
<td>1.2%</td>
<td>higher</td>
</tr>
<tr>
<td>East Tennessee Region</td>
<td>5</td>
<td>9</td>
<td>0</td>
<td>1407</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>Jackson-Madison County</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>Knox County-Knoxville</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>60</td>
<td>5.0%</td>
<td>higher</td>
</tr>
<tr>
<td>Mid-Cumberland Region</td>
<td>8</td>
<td>12</td>
<td>2</td>
<td>637</td>
<td>0.3%</td>
<td>higher</td>
</tr>
<tr>
<td>Shelby County (Memphis)</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>Nashville-Davidson County</td>
<td>6</td>
<td>11</td>
<td>0</td>
<td>628</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>Northeast Region</td>
<td>2</td>
<td>5</td>
<td>0</td>
<td>146</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>South Central Region</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>126</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>Southeast Region</td>
<td>2</td>
<td>4</td>
<td>0</td>
<td>106</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>Sullivan County (Tri-Cities)</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>278</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>Upper Cumberland Region</td>
<td>4</td>
<td>4</td>
<td>0</td>
<td>430</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>West Tennessee Region</td>
<td>5</td>
<td>6</td>
<td>0</td>
<td>296</td>
<td>0.0%</td>
<td>n/a</td>
</tr>
<tr>
<td>State of Tennessee</td>
<td>40</td>
<td>68</td>
<td>7</td>
<td>4279</td>
<td>0.16%</td>
<td></td>
</tr>
</tbody>
</table>

*The percentage of patients with ILI reported in Week 33 was 0.16% as compared to 0.21% in Week 32. To date, 221 specimens from Week 33 have been tested by TDH Laboratory Services and two commercial laboratories that serve clinics and hospitals across Tennessee; none tested positive for influenza viruses.*

*SPN sites should submit specimens year-round from ALL patients meeting the ILI case definition: Fever > 100°F (37.8°C) plus cough and/or sore throat, in the absence of a known cause (other than influenza). Case definition is not dependent on any test. If you have questions, contact your regional or state SPN representative. The TDH specimen submission form dated September 2015 should be used.*

*Specimens are critical to be able to track the geographic spread and intensity of seasonal influenza viruses, to detect the emergence of novel virus and/or antiviral resistance and provide data for vaccine strain selections.*

## Respiratory Viral Panel

**Number of Positive Specimens, by week**

<table>
<thead>
<tr>
<th>Month/Week</th>
<th>#</th>
<th>Flu A (H1N1)</th>
<th>Flu B</th>
<th>Parflu 2</th>
<th>Parflu 3</th>
<th>Parflu 4</th>
<th>Rhino</th>
<th>Adeno</th>
</tr>
</thead>
<tbody>
<tr>
<td>August</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current</td>
<td>221</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>32</td>
<td>169</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>31</td>
<td>150</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>July</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>162</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>29</td>
<td>168</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>28</td>
<td>155</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>
Influenza-like illness (ILI) is defined as fever > 100˚F (37.8˚C) plus cough and/or sore throat, in the absence of a known cause (other than influenza). Classification of ILI is based upon symptoms only and does not require any test.

The % of patients with ILI seen in each region is compared to the statewide average. Regions with % statistically-significantly different from the state average are noted as “higher” or “lower.” The CDC reports that the percentage of patients visiting outpatient healthcare providers in the Sentinel Provider Network (SPN) with influenza-like-illness (ILI) when influenza viruses are not circulating is expected to fall at or below a specific SPN baseline [nationwide = 2.2%, East South Central region (AL, TN, MS, KY) = 2.3%]. When the percentage of patients with ILI exceeds this baseline, this suggests that influenza viruses may be circulating.

Important information for Sentinel Providers

Sentinel Providers report ILI by the end of Wednesday following the end of the reporting week (https://wwwn.cdc.gov/illinet/) and collect and ship specimens from ILI cases Monday through Thursday (maximum 10/week per provider). All Sentinel Provider specimens MUST be accompanied by the Influenza and Respiratory Viral Panel Submission form or testing will not be done. The Respiratory Viral Panel is only validated for nasopharyngeal (NP) specimens. Specimens collected from other sites cannot be tested.

Additional laboratory supplies can be obtained by completing the lab order supply form. To ensure the order is filled, please include the CDC Provider ID Code.

Contact Information

Submit weekly reports to:  https://wwwn.cdc.gov/illinet/ OR Fax 888-232-1322

State Lab:  Bryan Mason (Virology, Respiratory Viral Panel)  615-262-6300

SPN Questions:
State: Robb Garman 800-404-3006 OR 615-741-7247
County/Region:  Regional SPN Coordinator (see map)