The percentage of patients with ILI reported in Week 46 was 0.94% as compared to 1.10% in Week 45. Forty-two specimens from Week 46 were tested for influenza and other respiratory viruses: 2 (or 4.8%) were positive for influenza A(H3) and several others were positive for other respiratory viruses.

Year-round influenza surveillance and testing
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.

Specimens are critical to be able to TRACK, DETECT and SELECT:
- track the geographic spread and intensity of seasonal influenza viruses
- detect the emergence of novel influenza viruses or of antiviral resistance in circulating viral strains and
- provide data for vaccine strain selections.

If you have questions, contact your regional or state SPN representative. The TDH specimen submission form dated Oct 2014 should be used.
Influenza Confirmed by Culture or PCR in Tennessee from Specimens Collected by Any Source within the Past 6 Weeks

November 9-15, 2014

- Strains are reported by county of case residence.
- Counties where influenza sentinel providers are located are identified with bold boundary lines.
- Stars mark counties with large metropolitan populations (Memphis, Jackson, Nashville, Chattanooga, Knoxville, and the Tri-Cities area).

2009 A(H1N1)  A(H3)  Seasonal B
Important information for Sentinel Providers

Sentinel Providers report ILI by the end of Tuesday following the end of the reporting week (www2a.cdc.gov/ilinet) 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: http://www2a.cdc.gov/ilinet/ OR Fax 888-232-1322

State Lab:
Dr. Amy Woron (Molecular Biology, PCR) 615-262-6362
Jim Gibson (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)

Reference Information for Sentinel Provider Network

1 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.

2 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.

The Tennessee Department of Health Mission: To protect, promote and improve the health and prosperity of people in Tennessee.

Our Vision: A recognized and trusted leader, partnering and engaging to accelerate Tennessee to one of the nation’s ten healthiest states.