

Sentinel Provider Influenza-Like Illness (ILI)¹ Surveillance Summary [\(health.state.tn.us/TNflu_report_archive.htm\)](http://health.state.tn.us/TNflu_report_archive.htm) for the Week of Nov. 23-29, 2014 (Week 48)

Summary for	# Sites reporting	Total Sites	Total Regional ILI	Total Regional Patients	% ILI	Compared to State ²
Hamilton County (Chattanooga)	3	4	1	334	0.3%	
East Tennessee Region	6	7	50	2198	2.3%	higher
Jackson-Madison County	1	1	4	337	1.2%	
Knoxville-Knox County	2	4	11	939	1.2%	
Mid-Cumberland Region	6	10	1	440	0.2%	lower
Shelby County (Memphis)	1	3	0	74	0.0%	
Nashville-Davidson County	2	5	4	237	1.7%	
Northeast Region	2	3	2	104	1.9%	
South Central Region	3	3	0	113	0.0%	
Southeast Region	3	5	2	167	1.2%	
Sullivan County (Tri-Cities)	2	2	1	313	0.3%	
Upper Cumberland Region	4	4	0	389	0.0%	lower
West Tennessee Region	6	6	0	189	0.0%	
State of Tennessee	41	57	76	5834	1.30%	

CDC Health Advisory: Drifted Influenza A(H3N2) Viruses

A CDC Health Advisory (<http://emergency.cdc.gov/han/han00374.asp>) issued December 3 indicated that 52% of influenza A (H3N2) viruses analyzed in the U.S. were antigenically different from the H3N2 vaccine virus. Although this may result in reduced effectiveness of vaccination against this particular strain, vaccination remains important.

Points of emphasis include:

- Even if vaccine effectiveness is reduced against the drifted strains, it will likely offer some protection and may reduce the risk of severe outcomes.
- Clinicians are reminded of the importance of empiric antiviral therapy for patients with severe illness and those at risk of serious illness when influenza is suspected, regardless of immunization history.
- As always, hand washing, covering coughs, and staying home when ill can decrease spread of influenza.

The percentage of patients with ILI reported in Week 48 was 1.30% as compared to 0.93% in Week 47. A significant increase in the proportion of specimens testing positive for influenza is noted this week: 56 specimens from Week 48 have been tested; 13 (23.2%) were positive for influenza viruses, all A(H3N2), suggesting that influenza activity is gradually increasing. Nationally, type A(H3N2) viruses are the most common this season.

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 Oct 2014 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.

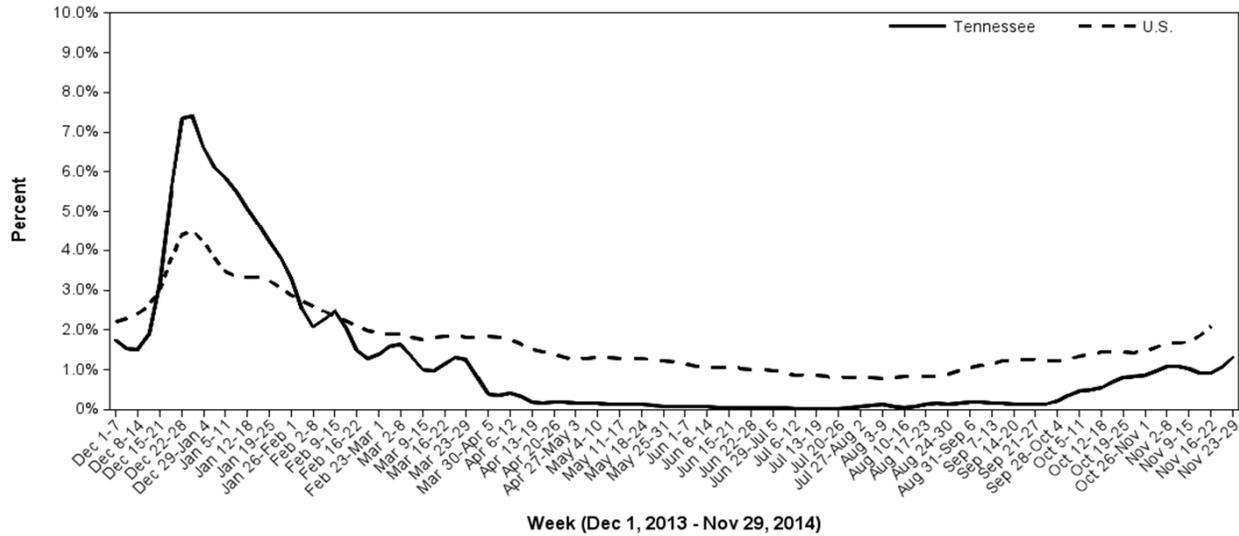
Respiratory Viral Panel

Number of Positive Specimens, by week

Month/Week	#	Flu A (H3)	Flu B	RSV A	RSV B	Paraflu 2	Paraflu 4	Rhino	Adeno B or E	Adeno C	Corona OC43
November											
Current	56	13	0	0	2	2	1	5	0	1	0
47	51	3	0	1	0	0	0	8	3	0	0
46	55	2	0	0	0	3	1	12	3	0	0
October											
45	49	2	0	0	0	0	1	6	2	0	1
44	50	2	1	0	0	4	1	8	2	0	0
43	40	0	0	0	0	3	1	5	0	0	1

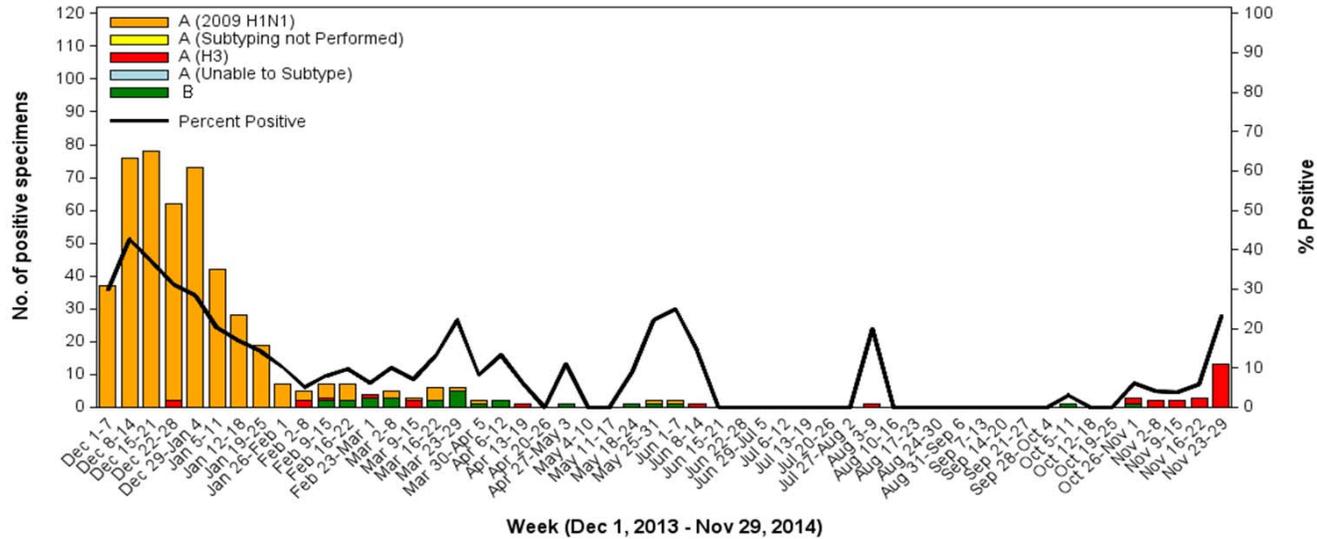
Percentage of Outpatient Visits Reported by the U.S. and Tennessee Outpatient Influenza-like Illness Surveillance Network (ILINet) as Influenza-like Illness, 2014-2015

Updated: December 5, 2014



Influenza Positive Tests Submitted to TN Dept. of Health Laboratory Services Tennessee, 2014-2015

Updated: December 5, 2014



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.

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

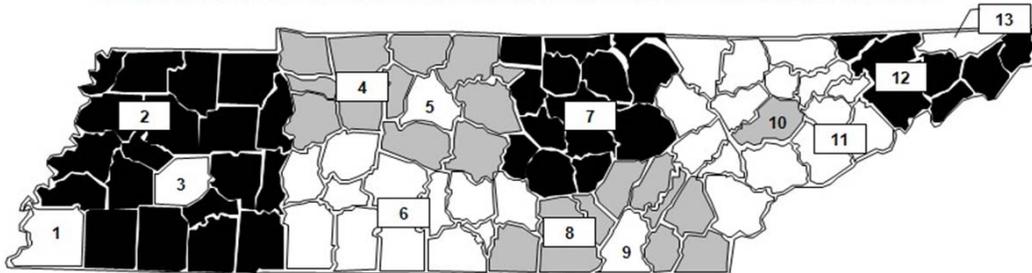
Submit weekly reports to: <http://www2a.cdc.gov/ilinet/> OR Fax 888-232-1322

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)

TENNESSEE SENTINEL PROVIDER NETWORK COORDINATORS



1	Shelby County	901-222-9239
2	West TN Region	731-421-6758
3	Jackson-Madison County	731-927-8540
4	Mid-Cumberland Region	615-650-7000
5	Nashville-Davidson County	615-340-0551
6	South Central Region	931-380-2532
7	Upper Cumberland Region	931-646-7505
8	Southeast Region	423-634-6065
9	Chattanooga-Hamilton County	423-209-8063
10	Knoxville-Knox County	865-215-5084
11	East TN Region	865-549-5287
12	Northeast Region	423-979-3200
13	Sullivan County	423-279-7545

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.