

Sentinel Provider Influenza-Like Illness (ILI)¹ Surveillance Summary (health.state.tn.us/TNflu_report_archive.htm)
For the Week of Dec. 9-15, 2012 (Week 50)

Summary for	# Sites reporting	Total Sites	Total Regional ILI	Total Regional Patients	% ILI	Compared to State ²
Hamilton County (Chattanooga)	4	4	9	738	1.2%	lower
East Tennessee Region	6	8	361	1938	18.6%	higher
Jackson-Madison County	1	1	39	540	7.2%	
Knoxville-Knox County	2	4	8	839	1.0%	lower
Mid-Cumberland Region	10	10	29	1154	2.5%	lower
Shelby County (Memphis)	3	10	45	490	9.2%	higher
Nashville-Davidson County	3	6	18	476	3.8%	lower
Northeast Region	2	3	5	173	2.9%	
South Central Region	3	3	6	235	2.6%	lower
Southeast Region	4	5	31	467	6.6%	
Sullivan County (Tri-Cities)	2	2	7	574	1.2%	lower
Upper Cumberland Region	4	4	3	644	0.5%	lower
West Tennessee Region	5	6	4	276	1.4%	lower
State of Tennessee	49	66	565	8544	6.61%	

Note to Sentinel Providers:

Sentinel Providers are reminded to submit specimens on all patients meeting the ILI case definition (up to 10 per week).

Please use the TDH specimen submission form dated October 2012.

The percentage of patients with ILI reported in Week 50 was 6.61%, compared with 5.37% in Week 49. Influenza viruses are circulating widely, with intense activity in some regions. Nationally, activity is highest in the Southeastern US; type A H3N2 seasonal viruses predominate. Vaccination is the best tool to reduce the risk of mortality; CDC reports a good match between circulating viruses and the vaccine. To date, 102 specimens from Week have been tested; 45 (44.1%) were positive for influenza viruses: 39 were A(H3N2), 5 were type B and one Flu A positive specimen was not subtypable. Sixteen (16) specimens also were positive for other respiratory viruses. A map of counties with confirmed influenza (PCR or culture) in the past six weeks is below. All Sentinel Providers should submit specimens regularly to identify locally circulating strains.

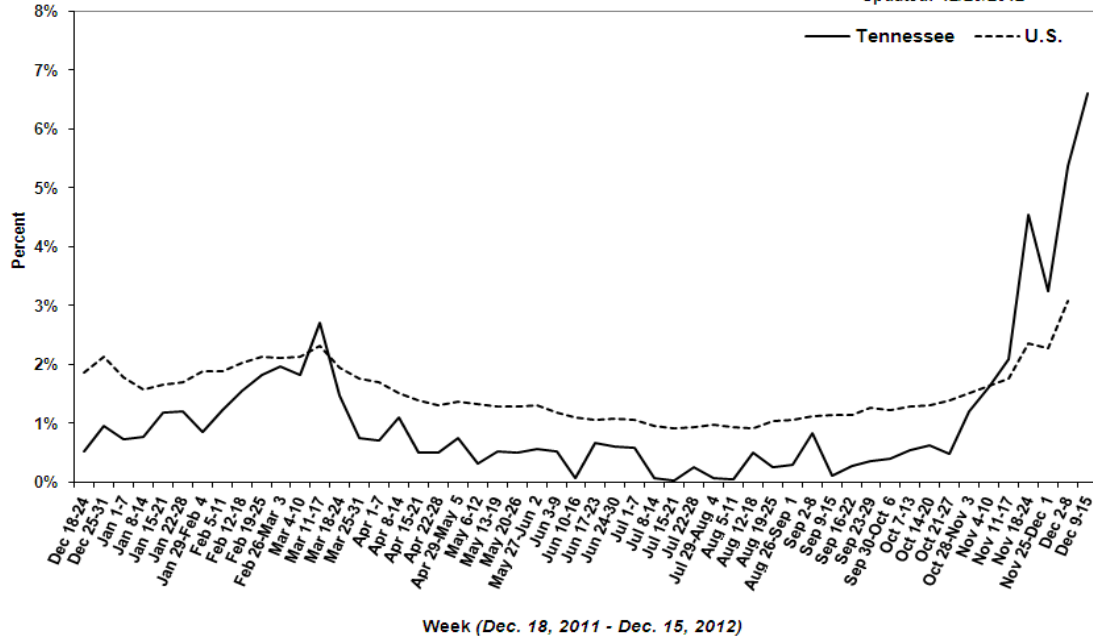
State Public Health Laboratory
 Respiratory Viral Panel

Number of Positive Specimens, by week

Month/Week	#	Flu A (H1N1)	Flu A(H3)	Flu A (no subtype)	Flu B	RSV A	RSV B	Paraflu 2	Paraflu 3	Paraflu 4	Rhino	Meta pnuemo	Corona OC43	Corona NL63	Adeno B	Adeno C
December																
Current	102	0	39	1	5	1	2	0	1	0	3	0	7	1	0	1
49	153	1	51	0	5	6	3	2	2	0	11	2	5	1	1	4
November																
48	89	0	32	0	1	0	1	1	0	0	15	0	7	0	1	1
47	38	0	11	0	1	1	0	1	0	0	3	0	1	0	1	1
46	38	1	9	0	0	2	0	0	1	0	8	0	1	0	0	0
45	38	0	6	0	0	0	0	0	2	1	6	0	1	0	1	1

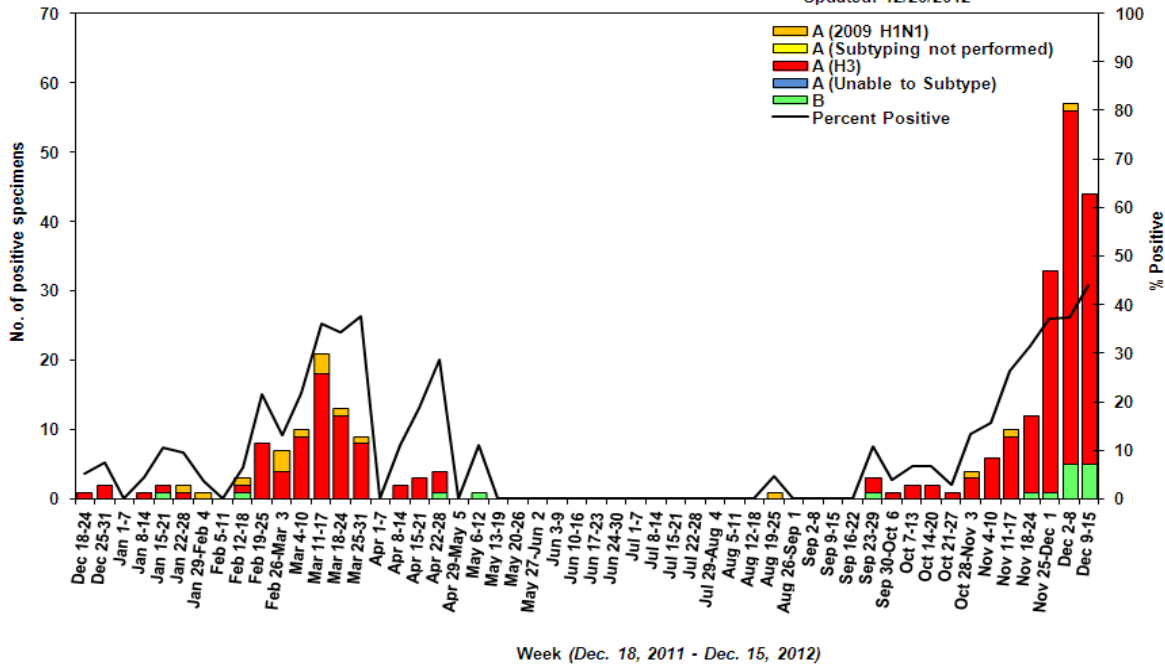
Percentage of Outpatient Visits Reported by the U.S. and Tennessee Outpatient Influenza-like Illness Surveillance Network (ILINet) as Influenza-like Illness, 2011-2012

Updated: 12/20/2012



Influenza Positive Tests Submitted to TN Dept. of Health Laboratory Services, Tennessee, 2011-2012

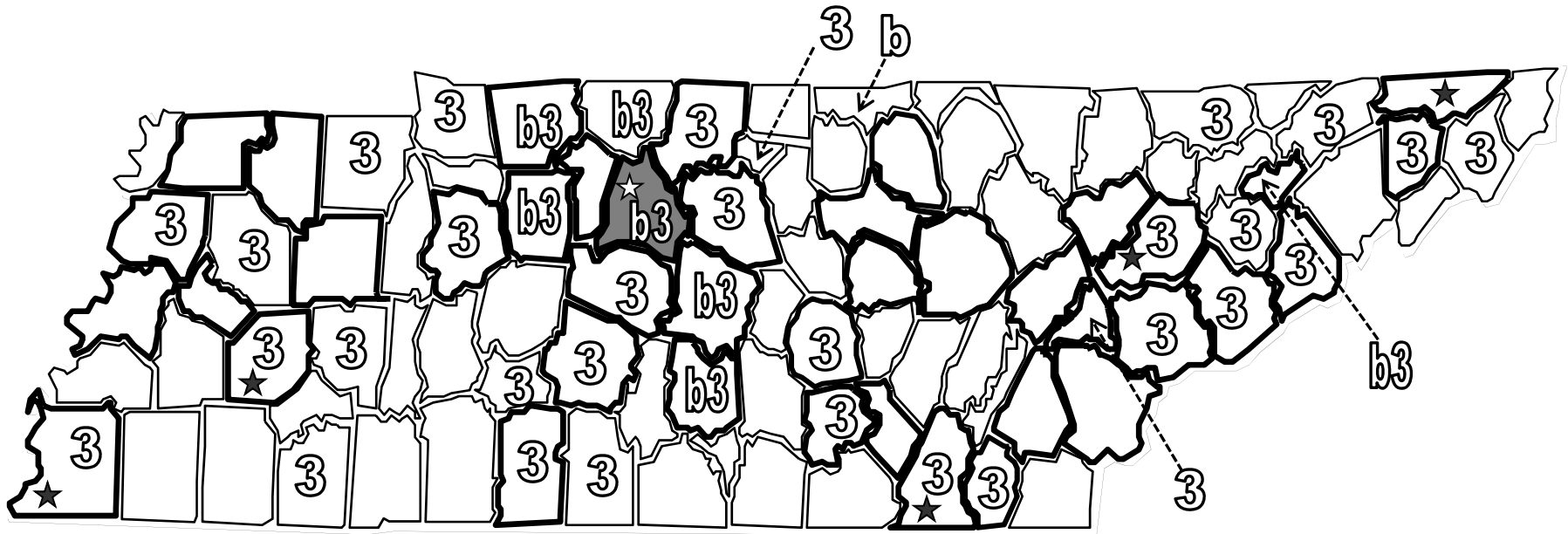
Updated: 12/20/2012






Influenza confirmed by culture or PCR in Tennessee from specimens collected by any source within the past 6 weeks.

November 4, 2012 to December 15, 2012

- Strains are reported by county of case residence or, if unknown, county where the specimen was collected.
- 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
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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

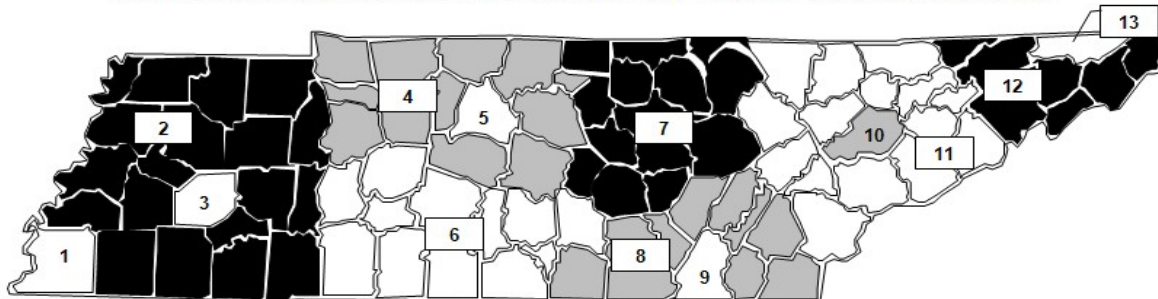
State Lab: Susan McCool 615-262-6351

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