## Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.

**Rick Scott** Governor

John H. Armstrong, MD, FACS

State Surgeon General & Secretary

## **MEMORANDUM**

DATE: January 3, 2014

TO: County Health Department Epidemiology Programs

FROM: Janet J. Hamilton, M.P.H.; Surveillance and Surveillance Systems Section Manager,

Bureau of Epidemiology, Florida Department of Health

SUBJECT: Summary of 2014 Changes to Reportable Disease Case Definitions, Florida

A number of changes to the Florida reportable disease surveillance case definitions for general communicable diseases have been identified as a result of the position statements approved by the Council of State and Territorial Epidemiologists (CSTE) at their June 2013 annual meeting. The revised case definitions should be used for reporting new 2014 cases beginning January 2014.

A short description of the Florida case definition revisions are included below. The fully revised document "Surveillance Case Definitions for Select Reportable Diseases in Florida, 2014" will be posted on the Bureau of Epidemiology website site http://www.floridahealth.gov/diseases-andconditions/disease-reporting-and-management/disease-reporting-and-surveillance/surveillance-andinvestigation-guidance/case-definitions.html.

Case definitions will also published individually by disease on the following website http://www.floridahealth.gov/diseases-and-conditions/disease-reporting-and-management/diseasereporting-and-surveillance/index.html.

## Summary of case definition changes for general communicable diseases:

- Acute arboviral disease (neuroinvasive and non-neuroinvasive): Fever was removed as a clinical criterion for neuroinvasive disease. Chills were added as an alternate clinical criterion to fever for non-neuroinvasive disease. Laboratory criteria were separated and refined for neuroinvasive and non-neuroinvasive disease.
- 2. Malaria: Expanded the confirmed case classification to include detection of unspeciated malaria parasite by microscopy on blood films in a laboratory with appropriate expertise in any person (symptomatic or asymptomatic) diagnosed in the United States, regardless of whether the person experienced previous episodes of malaria while outside the country. Laboratory criteria were expanded to request quantification of the parasitemia if available.
- 3. Pertussis: The case definition was revised to more accurately capture the burden of disease among infants <1 year of age. Apnea (with or without cyanosis) was added to the list of clinical signs or symptoms for infants aged <1 year. Additionally, probable case definitions were added for infants aged <1 year only: classification of PCR positive or epi-linked cases occurring among infants with cough of any duration and one other clinical symptom.
- 4. Trichinellosis: Probable and suspect case classifications were added. Revisions were related to the following issues: a) classification of an asymptomatic person; b) classification of symptomatic persons with no laboratory confirmation of disease, and c) the identification of the parasite in food

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- as a laboratory criterion for diagnosis. The confirmed case classification was revised to require clinically compatible illness.
- Saxitoxin: A probable case classification was added and the suspect case classification was
  revised. Revisions were related to epidemiologic linkage to confirmed cases and unknown sources
  of exposure.
- 6. Shiga Toxin-Producing *Escherichia coli*: Expanded the probable case classification by adding "a clinically compatible case who is a member of a defined risk group during an outbreak" to the exposure criteria. Formatting changes were made to clarify the existing case definition.
- 7. Lyme: Formatting changes were made to clarify the existing case definition.

These changes became effective in Merlin for the 2014 reporting year.

Thank you very much for your surveillance and reporting efforts throughout the year. Your input is essential as we continue to work together to prevent and control these diseases.