

Mission:

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



Rick Scott
Governor

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Surgeon General and Secretary

Vision: To be the **Healthiest State** in the Nation

INTEROFFICE MEMORANDUM

DATE: May 11, 2017

TO: County Health Department Epidemiology Programs

FROM: Janet J. Hamilton, MPH; Surveillance and Surveillance Systems Section Manager, Bureau of Epidemiology, Florida Department of Health

SUBJECT: Summary of 2017 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 2016 annual meeting. **The revised case definitions are effective for report year 2017, beginning January 1, 2017.**

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, 2017" will be posted on the Surveillance Case Definitions and MMWR Weeks website (www.Floridahealth.gov/DiseaseCaseDefinitions). Case definitions will also be published individually by disease on the Surveillance and Investigation Guidance website (www.Floridahealth.gov/SurveillanceInvestigationGuide).

Summary of case definition changes for general communicable diseases:**1. Amebic encephalitis:**

- Added presumptive laboratory criteria for *Naegleria fowleri* causing primary amebic meningoencephalitis including visualization of motile amebae in a wet mount of cerebrospinal fluid and isolation of *N. fowleri*
- Removed culture from laboratory criteria for *Balamuthia mandrillaris* disease and *Acanthamoeba* disease
- Removed *Acanthamoeba* keratitis from the case definition

2. Arboviruses: added a new suspect case classification for West Nile virus disease based on blood donor screening

3. Babesiosis: created case definition based on the national surveillance case definition

4. Campylobacteriosis:

- Specified clinical criteria for case classification
- Removed qualifiers from presumptive laboratory criteria so that culture-independent diagnostic testing is sufficient to meet the probable case classification and removed the suspect case classification
- Refined epidemiological linkage criteria

5. Dengue fever and severe dengue fever: added negative or indeterminate Zika virus component to one of possible confirmatory laboratory scenarios

6. Hepatitis B, perinatal: expanded laboratory criteria and created a new probable case classification for children whose mothers' hepatitis B virus status is unknown

7. **Hepatitis B, pregnant women:** expanded laboratory criteria.
8. **Hepatitis C, perinatal:** created a new probable case classification for children whose mothers' hepatitis B virus status is unknown
9. **Lead poisoning:** lowered the threshold for blood lead level from ≥ 10 $\mu\text{g/dL}$ to ≥ 5 $\mu\text{g/dL}$ to align with the national surveillance case definition
10. **Lyme disease:** updated epidemiologic criteria for case classification to differentiate between high incidence states (states with a 3-year average incidence of ≥ 10 cases per 100,000 persons) and low incidence states (states with a 3-year average incidence of < 10 cases per 100,000 persons for confirmed cases and clarified that suspect cases have no clinical information available
11. **Paratyphoid fever:** added a new case definition specifically for paratyphoid fever (*Salmonella* serotypes Paratyphi A, B, and C)
12. **Rubella:** added language excluding asymptomatic pregnant women who have no risk factors for disease from meeting the case definition
13. **Salmonellosis:**
 - Specified clinical criteria for case classification
 - Moved culture-independent diagnostic testing from supportive laboratory criteria to presumptive laboratory criteria
 - Refined epidemiological linkage criteria
 - Added criteria for distinguishing a new case from previous reports
14. **Shiga toxin-producing *Escherichia coli*:** specified clinical criteria for case classification and refined epidemiological linkage criteria
15. **Shigellosis:**
 - Specified clinical criteria for case classification
 - Moved culture-independent diagnostic testing from supportive laboratory criteria to presumptive laboratory criteria
 - Refined epidemiological linkage criteria
 - Added criteria for distinguishing a new case from previous reports
16. ***Streptococcus pneumoniae* invasive disease:** added presumptive laboratory criteria including culture-independent diagnostic testing and added criteria for distinguishing a new case from previous reports
17. **Tularemia:** expanded presumptive laboratory criteria to include polymerase chain reaction and added criteria for distinguishing a new case from previous reports
18. **Typhoid fever:** specified clinical criteria for case classification
19. **Vibriosis:**
 - Moved culture-independent diagnostic testing from supportive laboratory criteria to presumptive laboratory criteria
 - Refined epidemiological linkage criteria
 - Added criteria for distinguishing a new case from previous reports

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.