Sentinel Provider Influenza-Like Illness (ILI)¹ Surveillance Summary (health.state.tn.us/TNflu_report_archive.htm) For the Week of February 6-12, 2011 (Week 06)

			Total	Total		
	# Providers	Total	Regional	Regional		Comparison
Summary for	reporting	Providers	ILI	Patients	% ILI	to State ²
Chattanooga-Hamilton County	3	5	8	497		lower
East Tennessee Region	7	7	282	3816	7.4%	higher
Jackson-Madison County	1	1	71	917	7.7%	
Knoxville-Knox County	3	4	47	1271	3.7%	lower
Mid-Cumberland Region	10	10	100	1313	7.6%	
Memphis-Shelby County	2	5	1	134		lower
Nashville-Davidson County	3	6	182	1322	13.8%	higher
Northeast Region	2	3	3	337	0.9%	lower
South Central Region	3	3	0	290	0.0%	lower
Southeast Region	4	4	47	787	6.0%	
Sullivan County	2	2	7	328	2.1%	lower
Upper Cumberland Region	5	5	21	966	2.2%	lower
West Tennessee Region	6	6	3	284	1.1%	lower
State of Tennessee	51	61	772	12262	6.30%	-

Attention Sentinel Providers: The CDC continues to find that most circulating strains are well matched to the vaccine; vaccine effectiveness is good but varies by individual and breakthrough cases are not unusual.

However, CDC is interested in viruses collected from vaccine recipients. If you submit a specimen from an ILI patient, be sure you document vaccine status on the form!

The percentage (%) of patients with ILI reported in Week 06 was stable at 6.30%, compared to 6.45% in Week 05. Of the 76 specimens received from Week 5, 30 (39.5%) tested positive for influenza (all 3 circulating strains detected). CDC has detected no resistance in any circulating strains to neuraminidase inhibitors (oseltamivir, zanamivir) recommended to treat or prevent illness in persons at high risk of complications. A map of counties with confirmed PCR or culture-confirmed influenza in the past six weeks is below.

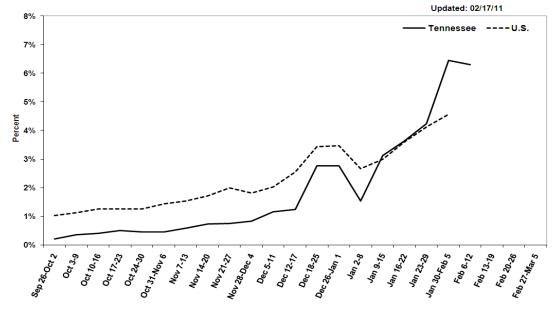
State Public Health Laboratory Respiratory Viral Panel

Number of Positive Specimens, by week

Month	Feb		Jan		
Week	Current	5	4	3	2
Total specimens tested	76	118	114	62	60
Influenza A 2009 H1N1	12	31	22	6	9
Influenza A H3N2	4	9	5	6	7
Influenza B	14	28	21	10	13
Respiratory Syncitial Virus A	*	*	*	*	*
Respiratory Syncitial Virus B	*	*	*	*	*
Parainfluenza 1	*	*	*	*	*
Parainfluenza 2	*	*	*	*	*
Parainfluenza 3	*	*	*	*	*
Rhinovirus	*	*	*	*	*
Metapneumovirus	*	*	*	*	*
Adenovirus	*	*	*	*	*

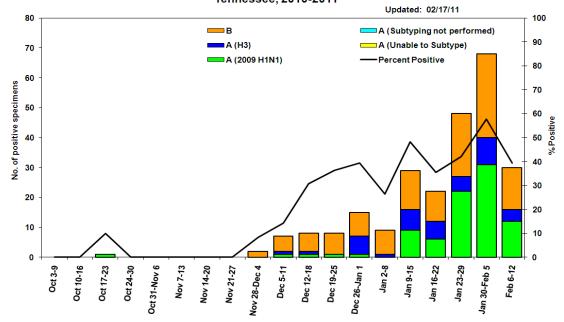
*Note: The RVP testing instrument is still being serviced. Only influenza PCR results are currently available.

Percentage of Outpatient Visits Reported by the U.S. and Tennessee Outpatient Influenza-like Illness Surveillance Network (ILINet) as Influenza-like Illness, 2010-2011



Week (Sep. 26- 2010 - Feb. 12, 2011)

Influenza Positive Tests Submitted to TN Dept. of Health Laboratory Services, Tennessee, 2010-2011

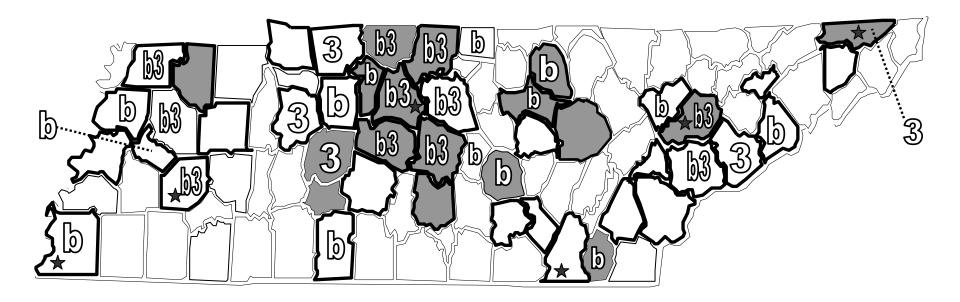


Week (Oct. 3, 2010-Feb. 12, 2011)

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

January 1, 2011 to February 12, 2011

- 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 marks counties with large metropolitan populations (Memphis, Jackson, Nashville, Chattanooga, Knoxville, and the Tri-Cities area)





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 dated 8/18/2010, 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

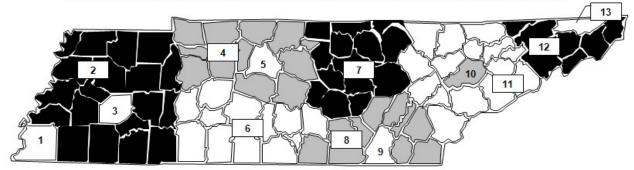
State Lab: Susan McCool 615-262-6351

SPN Questions:

State: Robb Garman or Robert Taylor 800-404-3006 OR 615-741-7247

County/Region: Regional SPN Coordinator (see map)

TENNESSEE SENTINEL PROVIDER NETWORK COORDINATORS



1	Shelby County	901-544-7717
2	West TN Region	731-423-6600
3	Jackson-Madison County	731-423-3020
4	Mid-Cumberland Region	615-650-7000
5	Nashville-Davidson County	615-340-5616
6	South Central Region	931-380-2532
7	Upper Cumberland Region	931-528-7531
8	Southeast Region	423-634-3124
9	Chattanooga-Hamilton County	423-209-8190
10	Knoxville-Knox County	865-215-5300
11	East TN Region	865-546-9221
12	Northeast Region	423-979-3200
13	Sullivan County	423-279-7545