

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 Oct. 5-11, 2014 (Week 41)

Summary for	# Sites reporting	Total Sites	Total Regional ILI	Total Regional Patients	% ILI	Compared to State ²
Hamilton County (Chattanooga)	2	4	0	560	0.0%	
East Tennessee Region	6	7	13	2697	0.5%	
Jackson-Madison County	1	2	7	504	1.4%	higher
Knoxville-Knox County	3	4	13	1710	0.8%	
Mid-Cumberland Region	7	10	8	875	0.9%	
Shelby County (Memphis)	0	5	0	0	0.0%	n/a
Nashville-Davidson County	2	5	0	163	0.0%	
Northeast Region	2	3	2	188	1.1%	
South Central Region	3	3	0	167	0.0%	
Southeast Region	4	5	3	801	0.4%	
Sullivan County (Tri-Cities)	2	2	0	647	0.0%	
Upper Cumberland Region	4	4	0	509	0.0%	
West Tennessee Region	6	6	0	340	0.0%	
State of Tennessee	42	60	46	9161	0.50%	

Influenza and pregnancy

CDC experts published a perspective piece in the New England Journal of Medicine (www.nejm.org/doi/full/10.1056/NEJMp1403496) exploring how the influenza virus affects pregnant women and their unborn babies. Also, a joint letter from public health and medical influenza experts to health care professionals encouraging flu vaccination in pregnant women is available at www.cdc.gov/flu/pdf/professionals/providers-letter-pregnant-2014.pdf

The percentage of patients with ILI reported in Week 41 was 0.50% as compared to 0.23% in Week 40. Twenty-five specimens from Week 41 were tested for the presence of influenza or other respiratory viruses; one (4.0%) was positive for influenza virus, a patient from Davidson County. Several specimens were positive for other respiratory viruses.

SPN sites should submit specimens from ALL patients meeting the ILI case definition. Specimens are critical to be able to TRACK, DETECT and SELECT:

- track the geographic spread and intensity of seasonal influenza viruses
- detect the emergence of novel influenza viruses or of antiviral resistance in circulating viral strains and
- provide data for vaccine strain selections.

Specimens should be submitted on patients meeting the ILI case definition (up to 10/week YEAR-ROUND). If you have questions, contact your regional or state SPN representative. Please use the TDH specimen submission form dated October 2014.

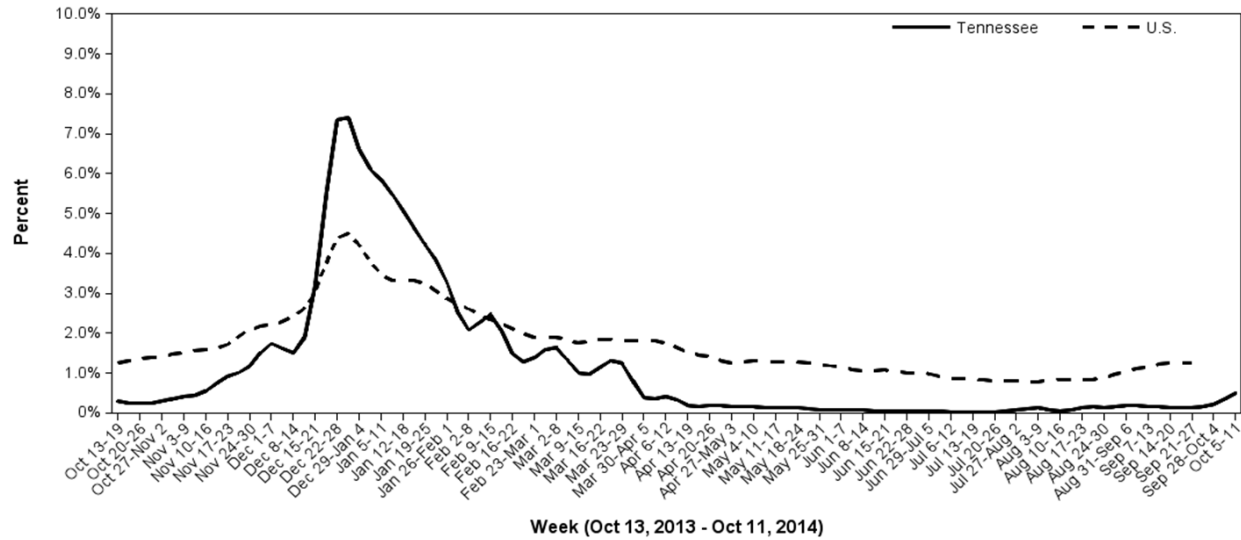
Respiratory Viral Panel

Number of Positive Specimens, by week

Month/Week	#	Flu B	RSV B	Paraflu 2	Rhino	Adeno C	Corona OC43
October							
Current	25	1	0	1	3	0	1
40	10	0	0	0	2	0	0
September							
39	6	0	0	0	3	1	0
38	12	0	0	0	2	0	0
37	8	0	1	0	1	0	0
36	10	0	0	0	5	0	0

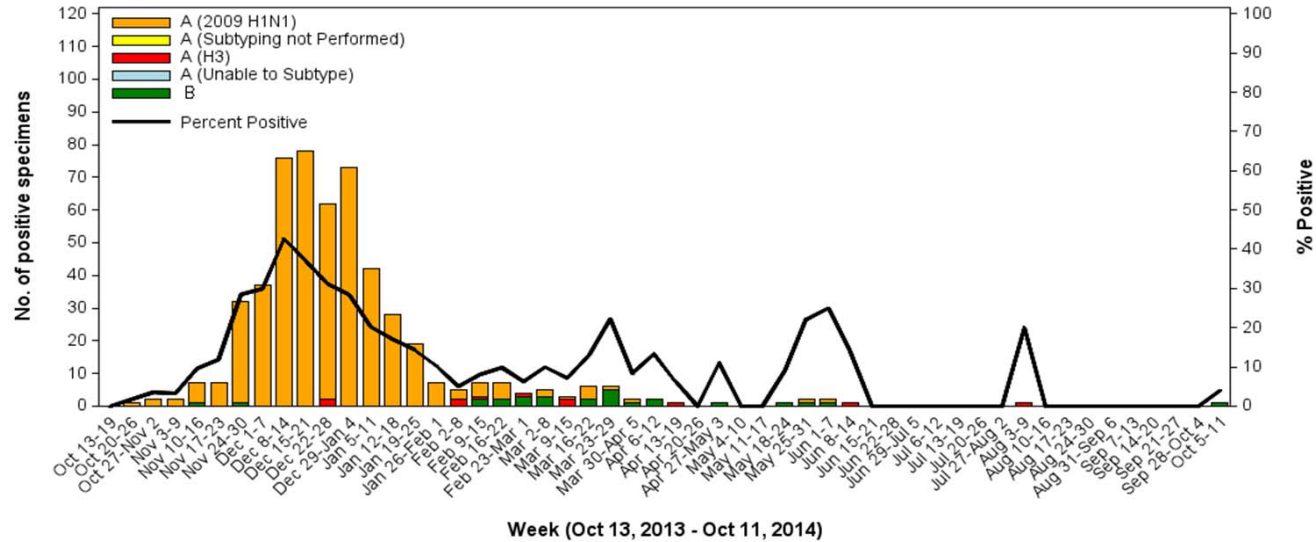
Percentage of Outpatient Visits Reported by the U.S. and Tennessee Outpatient Influenza-like Illness Surveillance Network (ILINet) as Influenza-like Illness, 2013-2014

Updated: October 16, 2014



Influenza Positive Tests Submitted to TN Dept. of Health Laboratory Services Tennessee, 2013-2014

Updated: October 16, 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

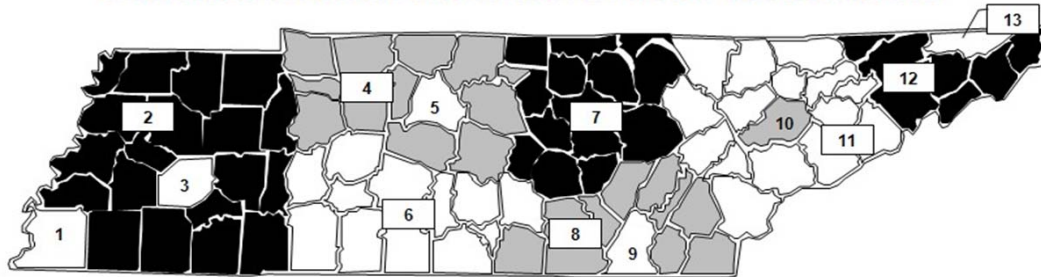
State Lab: Dr. Amy Woron (Molecular Biology, PCR) 615-262-6362
Jim Gibson (Virology, Respiratory Viral Panel) 615-262-6300

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.