October 9, 2014

TO: Health Care Providers, Clinical Laboratories, Hospitals, Nursing Homes, Health Care Facilities, and Local Health Departments

FROM: NYSDOH Bureau of Communicable Disease Control and Bureau of Health Care-Associated Infections

HEALTH ADVISORY:
INFLUENZA SURVEILLANCE AND REPORTING REQUIREMENTS, 2014–2015

For health care facilities, please distribute immediately to the Infection Control Department, Emergency Department, Infectious Disease Department, Director of Nursing, Medical Director, Director of Pharmacy, Laboratory Service, and all patient care areas.

PURPOSE

The New York State Department of Health (NYSDOH) is providing this document to summarize and assist health care providers, clinical laboratories, local health departments (LHDs), hospitals, nursing homes, and others with influenza reporting requirements.

INFLUENZA SURVEILLANCE AND REPORTING REQUIREMENTS

NYSDOH will conduct enhanced influenza surveillance beginning the first week in October 2014 through the third week in May 2015 (the week ending October 4, 2014 through the week ending May 23, 2015). Reporting requirements vary by setting and provider type and are detailed below.

All Settings

- Suspected or confirmed cases of any novel influenza A virus must be immediately reported by telephone to the LHD of the patient’s county of residence. Contact information for LHDs can be found at http://goo.gl/wfRgjb.
- Suspected or confirmed influenza-associated deaths in children aged < 18 years must be reported to the LHD of the patient’s county of residence.
Health Care Providers in the Ambulatory or Outpatient Setting

- Health care providers must report outbreaks* of influenza or influenza-like illness (ILI) to the LHD of the county in which the outbreak is occurring.
- Health care providers are not required to report positive influenza diagnostic tests performed outside of a full-service clinical laboratory.

Clinical Laboratories

- Full-service clinical laboratories that perform influenza testing on New York State residents are required to report all positive influenza laboratory test results, excluding serology, to the NYSDOH Electronic Clinical Laboratory System (ECLRS).
- Full-service clinical laboratories are identified by a four-digit Permanent Facility Identifier (PFI) number (for example, “1234”) assigned by the NYSDOH Wadsworth Center Clinical Laboratory Evaluation Program (CLEP). Identification numbers starting with a letter are assigned to partial-service or physician-operated laboratories; reporting is optional for these laboratories.
- Specimens that are suspected as novel influenza A viruses must be submitted in viral transport media to the New York State Wadsworth Center or the New York City Public Health Laboratory for confirmation. See http://www.wadsworth.org/labcert/regaffairs/clinical/commdiseaseguide.pdf.
- The ECLRS Help Desk (866-325-7743) is available to answer questions and assist full-service clinical laboratories with reporting procedures.

Local Health Departments (LHDs)

- LHDs should promptly investigate and report community outbreaks of influenza or ILI to their NYSDOH regional epidemiology office.
- The NYSDOH Statistical Unit creates influenza case reports on the NYSDOH Communicable Disease Electronic Surveillance System (CDESS) from ECLRS laboratory reports from full-service clinical laboratories that meet NYSDOH influenza case definition.
  - LHDs should not dismiss ECLRS influenza reports that use one of the influenza ECLRS disease descriptions (e.g., influenza A, influenza B, etc.)
  - However, if an LHD sees an ECLRS influenza report in the “Not Otherwise Specified” (NOS) ECLRS disease description, the LHD should:
    - dismiss the report if the NOS ECLRS report indicates negative influenza results; or
    - create a CDESS investigation if the NOS ECLRS report indicates positive influenza results. The Statistical Unit will then handle further.
  - LHDs are requested not to modify any CDESS influenza investigations. If necessary, the Statistical Unit will modify CDESS influenza investigations.
  - LHDs may modify supplemental information in CDESS cases, but should not modify the case status.
  - If LHDs have any questions regarding ECLRS/CDESS influenza reporting, please call the Statistical Unit at 518-402-5012.

* An outbreak is defined as an increase in the number of persons ill with laboratory-confirmed influenza or influenza-like illness (ILI) above a commonly observed baseline in a particular community or facility setting.
- LHDs are not required to complete CDESS influenza case supplementals except in the event of pediatric influenza-associated deaths.
- LHDs should promptly report suspected or confirmed influenza-associated deaths in children aged < 18 years to their NYSDOH regional epidemiology office.
  - LHDs are required to investigate the case and complete a case report on CDESS under “Influenza, Pediatric Death.” Regional epidemiology office staff will assist LHD staff as needed.
  - LHDs may be asked to follow up with laboratories or medical examiner offices to request that pre- or post-mortem specimens be forwarded to the Wadsworth Center and/or the Centers for Disease Control and Prevention (CDC) for additional testing.

**Hospitals**
- During October to May, hospitals with licensed medical/surgical beds must report weekly the aggregate number of hospitalized laboratory-confirmed influenza cases to the NYSDOH. This reporting is done via the “Weekly Influenza Hospitalizations” survey on the Health Electronic Response Data System (HERDS) application, which is located on the NYSDOH Health Commerce System (HCS) at: [https://commerce.health.state.ny.us/](https://commerce.health.state.ny.us/).
  - Only patients who are admitted to the hospital, or to the Emergency Department for more than 24 hours, are required to be reported.
  - Cases are to be reported every week for the previous week ending Saturday at midnight.
  - Cases are to be reported by age group: 0–4 years, 5–17 years, 18–49 years, 50–64 years, and ≥65 years.
  - Cases are to be reported only once, when first identified (i.e., when both conditions – hospitalized and laboratory-confirmed for influenza – become true).
  - Both community-associated and health care facility-associated (nosocomial) cases should be included.
  - Patients counted during the week ending each Saturday at midnight should be entered into HERDS anytime between Sunday at 12:01 AM through Wednesday at noon.
    - As an example, for patients identified during the week Sunday September 28 through Saturday October 4, 2014, hospitals should enter data between 12:01 AM on Sunday October 5, 2014 and noon on Wednesday October 8, 2014.
    - In HERDS, “Time Period” corresponds to the surveillance week ending date. In the above example, a hospital would select the Time Period “10/04/2014.”
    - If you have no cases to report, please enter “0” in the requested fields and submit the survey.
    - Be sure to press the **Save button**, then the **Review and Submit** button, and finally the **Submit to DOH** button in order to successfully submit your data to NYSDOH. Pressing the Review and Submit button alone does not submit your data to NYSDOH. Any saved data will be automatically submitted after noon each Wednesday.
    - If your data changes after submission, revisions are encouraged.
      - You will be able to revise submitted data for the previous four weeks only.
If you need to revise data that were submitted prior to the previous four weeks, please contact the Office of Health Emergency Preparedness (OHEP) at 518-408-5163, and that office will assist you.

- Weekly reporting for the 2014-15 influenza season will begin Sunday October 5, 2014 for the week ending Saturday October 4, 2014 and continue through Wednesday May 27, 2015 for the week ending May 23, 2015. (However, revisions may be made through Saturday May 30, 2015).
- For any programmatic issues, please contact the Bureau of Communicable Disease Control (BCDC) at 518-473-4439.
- For any technical difficulties with accessing or using HERDS, please contact OHEP at 518-408-5163.

- Hospitals must report all confirmed or suspected health care facility-associated influenza outbreaks (a single confirmed case associated with the facility is considered an outbreak) to the NYSDOH Health Care Epidemiology and Infection Control Program (HEIC) via the Nosocomial Outbreak Reporting Application (NORA) located on the HCS at: https://commerce.health.state.ny.us/.
  - If you need access to NORA, please contact your facility’s HCS coordinator and ask to be assigned to the “Infection Control Practitioner” role in the HCS Communications Directory. Once in this role, your access to NORA is immediate. Until you have access to NORA, a paper NORA report must be completed and submitted by fax to 518-402-5165. This form can be accessed at: http://www.health.ny.gov/forms/doh-4018.pdf.
  - For questions regarding health care facility-associated reporting, contact the appropriate NYSDOH Regional Epidemiology office:
    - Western Regional Office: 716-847-4503
    - Central New York Regional Office: 315-477-8166
    - Capital District Region: 518-474-1142
    - Metropolitan Area Regional Office: 914-654-7149

Nursing Homes
- Nursing homes must report all confirmed or suspected health care facility-associated influenza outbreaks (a single confirmed case associated with the facility is considered an outbreak) to the NYSDOH Health Care Epidemiology and Infection Control Program (HEIC) via the Nosocomial Outbreak Reporting Application (NORA) located on the HCS at: https://commerce.health.state.ny.us/.
  - If you need access to NORA, please contact your facility’s HCS coordinator and ask to be assigned to the “Infection Control Practitioner” role in the HCS Communications Directory. Once in this role, your access to NORA is immediate. Until you have access to NORA, a paper NORA report must be completed and submitted by fax to 518-402-5165. This form can be accessed at: http://www.health.ny.gov/forms/doh-4018.pdf.
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Influenza Outbreaks in Community or Other Facility Settings

- Under New York State public health law, outbreaks of influenza or ILI occurring in community or facility settings such as state institutions, day care centers, schools, colleges, group homes, adult homes, and assisted living facilities must be reported by the director of the facility to the LHD in which the facility is located.
- LHDs are required to investigate and report such community outbreaks to their NYSDOH regional epidemiology office.

INFLUENZA SURVEILLANCE REPORTS

Weekly New York State influenza surveillance information, including the currently circulating influenza virus types, subtypes, and antiviral resistance information, will be available at the:

- NYSDOH HCS at: https://commerce.health.state.ny.us/. Log onto the site. Click on the “My Content” button at the top of the page. Then click on “Documents by Group” > “Diseases and Conditions” > “Influenza” > “Surveillance” > “Weekly Reports 2014-15.”

ADDITIONAL INFORMATION

- General resources on influenza, including vaccine information, are available on the NYSDOH public website at: http://www.health.ny.gov/diseases/communicable/influenza/seasonal/ and the CDC website at: http://www.cdc.gov/flu/.
- Information for health care workers about documentation of vaccination against influenza, or wearing of a surgical or procedure mask is available on the NYSDOH public website at: http://www.health.ny.gov/flumaskreg.
- Additional information regarding Wadsworth Center laboratory testing is available at: http://www.wadsworth.org/labcert/regaffairs/clinical/commdiseaseguide.pdf.
- Contact information for LHDs can be found at: http://goo.gl/wfRgjb.
- For additional information, please contact BCDC at 518-473-4439 or HEIC at 518-474-1142.