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## **Health Alert** **IDPH Influenza Reporting Update – 9/15/09**

This information pertains to reporting of both seasonal and 2009 H1N1 influenza. Influenza reporting requirements are subject to change—please continue to review Health Alerts issued by IDPH and local health departments.

- 1. Updated influenza reporting requirements are outlined below.**
- 2. All hospital IPs should ensure their web portal registrations are up to date. See notification of 9.14.09 on Updating IDPH Webportal Profile details.**

### **IDPH Influenza Reporting Requirements**

#### **A. Case based reporting**

1. Report hospitalizations ( $\geq 24$  hours) and deaths due to confirmed or probable 2009 H1N1 influenza. (See current case definitions below).
2. Report pediatric deaths with illness that is clinically compatible with influenza for which there is any positive influenza test.<sup>1</sup> This reporting requirement overlaps with the above requirement, but also includes pediatric deaths due to seasonal influenza.

Case reports should be entered in INEDSS as soon as possible, within 24 hours. Hospitals not using I-NEDSS should fax case reports to the local health department.

Hospitalized patients that are suspect 2009 H1N1 influenza cases do not need to be entered into I-NEDSS. Also, 2009 H1N1 influenza test results for outpatients that are suspect, probable or confirmed 2009 H1N1 influenza cases no longer need to be reported or entered in I-NEDSS, unless there is a specific request to do so by the health department. For example, local health departments that have not yet had any cases of 2009 H1N1 influenza infection reported in their county may request that physicians report outpatients diagnosed with 2009 H1N1 infection, so as to be able to document the first laboratory confirmed 2009 H1N1 infection in the county.

#### **B. Other reporting**

1. Until further notice, clusters of three or more patients with ILI (see case definition below) during a one week period in a long-term care facility, homeless shelter, prison or other congregate living facility should be reported immediately to the local health department for consultation.

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<sup>1</sup> Rapid antigen test, DFA, IFA, culture, or PCR

2. Most local health departments have provided guidance to local schools about school based reporting (e.g.absenteeism). School districts are responsible for reporting school dismissals to CDC's online school reporting system. Additional guidance from IDPH regarding monitoring of ILI in schools is forthcoming.

3. Sentinel providers will continue to provide information regarding ILI to IDPH.

### **C. Additional reporting**

1. CDC has issued new requirements for weekly reports from each state regarding all influenza associated (seasonal and 2009 H1N1) hospitalizations and deaths We are currently surveying hospital infection preventionists regarding the feasibility of various reporting methods; in the interim, we are continuing to report 2009 H1N1 hospitalizations and deaths to CDC. Up to date web portal accounts will be necessary for this reporting.

2. IDPH is also implementing plans to collect data regarding ED utilization during the upcoming influenza season; additional guidance is also forthcoming on this topic.

**Weekly reports on 2009 H1N1 hospitalizations and deaths and other statistics are available at [http://www.idph.state.il.us/h1n1\\_flu/sf\\_statistics.htm](http://www.idph.state.il.us/h1n1_flu/sf_statistics.htm). Information regarding outpatient influenza like illness trends and virologic data are available at <http://www.idph.state.il.us/flu/fluupdate08-09.htm>.**

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Case definitions for 2009 H1N1 influenza can be found at:  
<http://www.cdc.gov/h1n1flu/casedef.htm>.

Current case definitions are as follows:

A **confirmed case** of 2009 H1N1 influenza virus infection is defined as a person with a influenza syndrome (typically a febrile respiratory syndrome) and laboratory confirmed 2009 H1N1 influenza virus infection by one or more of the following tests:

1. real-time RT-PCR
2. viral culture

A **probable case** of 2009 H1N1 influenza virus infection is defined as a person with an influenza-syndrome (typically a febrile respiratory syndrome) who is

- positive for influenza A, but negative for human H1 and H3 by influenza RT-PCR

### **Influenza-like illness**

ILI is defined as fever (temperature of 100°F [37.8°C] or greater) and a cough and/or a sore throat in the absence of a KNOWN cause other than influenza.