



STATE OF MARYLAND

**DHMH**

Maryland Department of Health and Mental Hygiene

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**Infectious Disease & Environmental Health Administration**

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**MEMORANDUM**

**DATE:** December 21, 2010 **HO Memo #10-047**

**TO:** Health Officers  
Communicable Disease Directors  
Communicable Disease Staff  
Nursing Directors

**FROM:** Alvina Chu, MHS, Chief  
Division of Outbreak Investigation

**THROUGH:** Lucy Wilson, ScM, MD, Chief  
Center for Infectious Disease Surveillance Infection Prevention and  
Outbreak Response

**RE:** Interim Guidance for Laboratory Testing and Outbreak Response for 2010-  
2011 Influenza Season

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The Office of Infectious Disease Epidemiology and Outbreak Response (IDEOR), in conjunction with the Laboratories Administration have revised recommendations for testing for influenza surveillance this season. As the season evolves, guidance will be updated, if necessary. Testing will focus on identifying those with the clinical features of: T>100°F AND cough or sore throat OR sepsis-like syndrome and most severely affected (hospitalized), working with most vulnerable (healthcare workers), or associated with outbreaks in defined settings.

Identification of outbreaks may be guided by the attached table of definitions. These definitions are for general use. There may be situations where an outbreak may be identified given information not listed in these definitions. Please do not hesitate to contact our offices, at 410-767-6677, with any further questions or suggestions.

201 W. Preston Street, Baltimore, Maryland 21201  
410-767-6700 Fax 410-669-4215  
Toll Free 1-877-4MD-DHMH TTY for Disabled  
Maryland Relay Service 1-800-735-2258

500 N. Calvert Street, 5<sup>th</sup> Fl. Baltimore, Maryland 21202  
410-767-5227 Fax 410-333-6333 TDD for Disabled 410-333-4800  
Toll Free 1-800-358-9001 TTY for Disabled  
Maryland Relay Service 1-800-735-2258

Web Site: <http://eh.dhmh.md.gov/ideha/>

cc: K. Black D. Blythe R. Scurry J. Colmers H. Hauck  
R. Myers D. Paulson F. Phillips A. Wakhweya

Attachments:

- (1) Guidance for Specimen Collection for Influenza Testing at State Laboratory
- (2) Interim guidance for influenza/ILI outbreaks

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**General Definitions for Influenza/ILI Outbreaks**  
**DHMH, Division of Outbreak Investigation**  
**December 2010**

<b>Illness</b>	<b>Outbreak Definition</b>
<b>Acute febrile respiratory disease (AFRD)</b> at a nursing home (NH) or assisted living (AL) facility	3 or more persons with cough & fever in a facility within a 7 day period from June 1 to September 31 (outside of influenza season) OR during influenza season if DHMH has conducted testing and has ruled out influenza as the causative agent <sup>1</sup>
<b>Influenza</b> at a NH or AL	1 or more cases of laboratory-confirmed influenza (note: lab confirmatory tests include PCR or culture by DHMH OR a positive rapid antigen test conducted by either DHMH or a health care facility after DHMH has conclusively confirmed Maryland's 1 <sup>st</sup> flu case during the influenza season each year) <sup>1</sup>
<b>Influenza-like illness (ILI)</b> at a NH or AL	3 or more persons with cough and fever in a facility within a 7 day period from October 1 to June 30 (during influenza season) <sup>1</sup>
<b>Influenza-like illness (ILI)</b> at a child care center	A. 10% absentee rate AND 3 or more attendees sent home with ILI (temperature of $\geq 100^{\circ}$ F [ $37.8^{\circ}$ C] plus cough or sore throat) or influenza at the facility within 48 hours; OR B. A substantial ILI/influenza cluster (generally defined as >25% of a specific group) in a single child care center associated group (such as classroom); however judgment must be used in special settings <sup>2</sup>
<b>Influenza-like illness (ILI)</b> at a child care home	3 or more cases of ILI (temperature of $\geq 100^{\circ}$ F [ $37.8^{\circ}$ C] plus cough or sore throat) or influenza at the facility within a 7 day period <sup>2</sup>
<b>Influenza-like illness (ILI)</b> at a colleges and universities	When the proportion of ILI visits to student health center $\geq$ 10% of all visits to student health center or recognized cluster in a defined population, such as dorm, team, sorority/fraternity houses ( $\geq$ 25% ILI in the defined population) <sup>3</sup>
<b>Influenza-like illness (ILI)</b> at a K-12 school	A. a doubling of the baseline absenteeism rate on one day AND 5 cases of ILI (Fever $\geq 100^{\circ}$ F plus cough or sore throat) or influenza seen in the school health room on that same day; OR B. 3 cases of ILI or influenza from the same single classroom seen in the school health room on the same day; OR C. An unusual occurrence or important situation reported by the school to the LHD, including:

	<ul style="list-style-type: none"> <li>• ILI in special situations/groupings of students (such as special needs, high risk or immunocompromised);</li> <li>• Other signs of ILI as assessed by school health professional<sup>4</sup></li> </ul>
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References

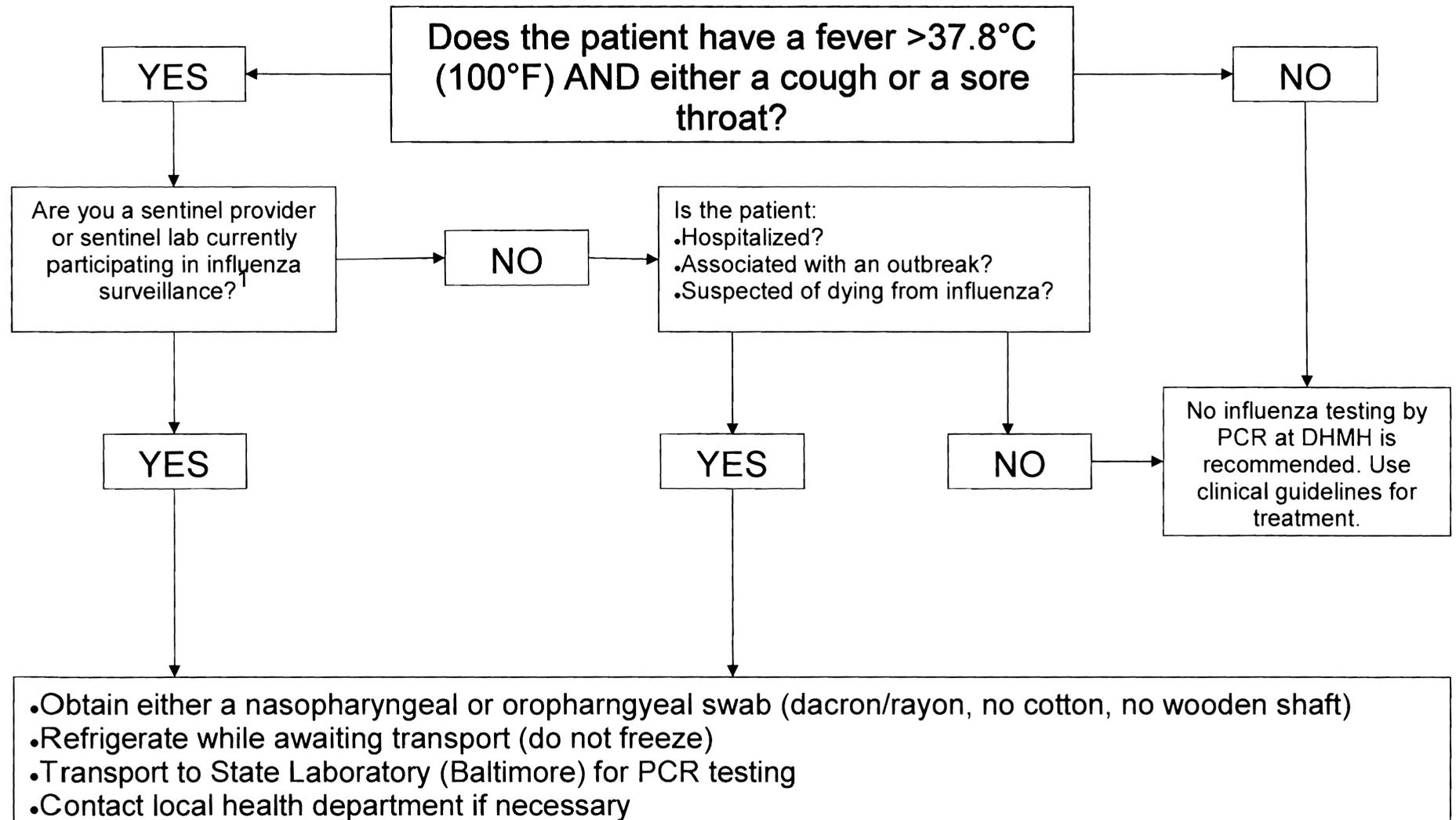
<sup>1</sup> DHMH, Guidelines for the Prevention and Control of Upper and Lower Acute Respiratory Illnesses (including Influenza and Pneumonia) in Long Term Care Facilities, 2000, <http://www.edcp.org/guidelines/resp97.cfm>

<sup>2</sup> DHMH HO Memo #09-080 Interim Definition for an Outbreak of Influenza-like Illness (ILI) or Influenza Associated with a Day Care Facility and Guidance for Local Health Department Response, October 23, 2009

<sup>3</sup> DHMH HO Memo #09-072 Interim Guidance for Reporting Outbreaks of Influenza-like Illness (ILI) or Influenza Associated with Institutions of Higher Education to Public Health During 2009-2010 Flu Season, September 24, 2009

<sup>4</sup> DHMH HO Memo #09-070 Interim Definition for an Outbreak of Influenza-like Illness (ILI) or Influenza Associated with a K-12 School and Guidance for Local Health Department Response, September 16, 2009

## Guidance for specimen collection for influenza testing at State Laboratory 2010-11 Influenza Season



<sup>1</sup>“Sentinel Providers” and “Sentinel Laboratories” are healthcare providers and clinical laboratories, respectively, who participate in the influenza surveillance program run by DHMH. Any providers interesting in participating may contact Rene Najera at 410-767-6235.