

Influenza-associated Hospitalizations

I. IDENTIFICATION

A. **CLINICAL DESCRIPTION:** An influenza-associated hospitalization is defined for surveillance purposes as an inpatient hospitalization resulting from a clinically compatible illness that was confirmed to be influenza by an appropriate laboratory diagnostic test. There should be no period of complete recovery between the illness and hospitalization.

B. **REPORTING CRITERIA:** Laboratory confirmation.

C. CASE CLASSIFICATION:

Confirmed case: A person who is hospitalized (>24 hours) AND has confirmed influenza A or B with one of the following laboratory tests: RT-PCR, DFA, or culture.

Probable case: A person who is hospitalized (>24 hours) AND has a rapid influenza test that is positive for type A, type B, or undifferentiated influenza.

NOTE: Single serology, influenza IGM positive test results are not diagnostic and do not meet the criteria for laboratory confirmation

II. ACTIONS REQUIRED / PREVENTION MEASURES

A. **WISCONSIN DISEASE SURVEILLANCE CATEGORY II: WISCONSIN DISEASE SURVEILLANCE CATEGORY II:** Report to the patient's local health officer on an Acute and Communicable Disease Case Report (DPH 4151), or through the Wisconsin Electronic Disease Surveillance System (WEDSS), or other means within 72 hours of the identification of a confirmed or probable case.

B. EPIDEMIOLOGY REPORTS REQUESTED:

- Acute and Communicable Diseases Case Report (DPH 4151).

C. PUBLIC HEALTH INTERVENTIONS:

Public health intervention is not required.

III. CONTACTS FOR CONSULTATION

A. **BCDER / COMMUNICABLE DISEASE EPIDEMIOLOGY SECTION:** (608) 267-9003 or (608) 266-5326.

B. **WSLH / VIRUS ISOLATION:** (608) 262-3185.