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To: Local and Tribal Health Departments

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Public Health Follow-up of Suspected Cases of Infant Methemoglobinemia

Per Wis. Admin. Code ch. DHS 145 Appendix A, infant methemoglobinemia is a [Category II disease](#) and is included in the list of [Communicable Diseases and Other Notifiable Conditions](#). Infant methemoglobinemia (also known as “blue baby syndrome”) is a blood disorder that impairs the transport of oxygen. There are many causes of methemoglobinemia, one of which is the ingestion of nitrate-contaminated well water.

The Bureau of Environmental and Occupational Health (BEOH) is working to enhance surveillance of infant methemoglobinemia. Timely recognition and reporting of suspect cases enables public health to investigate, intervene, and prevent additional exposures. This memo provides clarification to the case reporting and investigation guidelines as described below.

For Local and Tribal Health Departments

Local and tribal health departments are requested to review suspect infant methemoglobinemia cases with blood methemoglobin levels **at or above 1.5%** among **infants aged 12 months or less**. For these cases, please proceed with the following three steps:

1. Cases reported via WEDSS can be found under the “Methemoglobinemia” disease category. If the case is reported via phone or fax, create a new record in WEDSS.
2. Medical records for cases that meet the criteria above should be requested and uploaded into the WEDSS filing cabinet. Requested medical records should be for the clinical encounter in which methemoglobin testing was performed; include all laboratory testing and admission and discharge summaries.
3. Cases should be marked as “Suspect” in the “Resolution Status” field and “Sent to State” in the “Process Status” field within WEDSS. **No additional follow-up is expected.**

For cases with a methemoglobin level below 1.5% **and/or** an age greater than 12 months, mark the “Resolution Status” as “Not A Case” and select “Process Status” as “Sent to State” in WEDSS.

NOTE: BEOH will conduct follow-up and classify the reported cases. Local and tribal health agencies that wish to conduct their own investigations should notify [BEOH](#) for further information.

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Additional information regarding infant methemoglobinemia can be found at the [DPH Infant Methemoglobinemia webpage](#). For more information, please contact [Megan Christenson](#).