



Communicable Disease Case Reporting and Investigation Protocol **INFLUENZA-ASSOCIATED HOSPITALIZATIONS**

I. IDENTIFICATION AND DEFINITION OF CASES

- A. **Clinical Description:** An influenza-associated hospitalization is defined for surveillance purposes as an inpatient hospitalization resulting from a clinically compatible illness that was diagnosed as influenza by an appropriate laboratory test. There should be no period of complete recovery between the illness and hospitalization.
- B. **Laboratory Criteria:**
- Confirmatory laboratory evidence: Influenza type A or B identified by one of the following laboratory tests: reverse transcription polymerase chain reaction (RT-PCR), direct fluorescent antibody (DFA), or culture.
 - Probable laboratory evidence: Influenza type A or B, or undifferentiated influenza identified by a rapid influenza test.
 - Single serology, influenza IGM positive test results are not diagnostic and do not meet the criteria for laboratory confirmation,
- C. **Wisconsin Surveillance Case Definition:**
- Confirmed: A patient who is hospitalized (>24 hours) and has confirmed influenza type A or B with one of the following laboratory tests: RT-PCR, DFA, or culture.
 - Probable: A patient who is hospitalized (>24 hours) and has a rapid influenza test that is positive for type A, type B, or undifferentiated influenza.

II. REPORTING

- A. **Wisconsin Disease Surveillance Category II – Methods for Reporting:** This disease shall be reported to the patient's local health officer or to the local health officer's designee within 72 hours of recognition of a case or suspected case, per Wis. Admin. Code § [DHS 145.04 \(3\) \(b\)](#). Report electronically through the Wisconsin Electronic Disease Surveillance System (WEDSS), or mail or fax a completed Acute and Communicable Disease Case Report ([F-44151](#)) to the address on the form.
- B. **Responsibility for Reporting:** According to Wis. Admin. Code § [DHS 145.04\(1\)](#), persons licensed under Wis. Stat. ch. [441](#) or [448](#), laboratories, health care facilities, teachers, principals, or nurses serving a school or day care center, and any person who knows or suspects that a person has a communicable disease identified in [Appendix A](#).
- C. **Clinical Criteria for Reporting:** Clinically compatible illness.
- D. **Laboratory Criteria for Reporting:** Laboratory identification of influenza infection.

III. CASE INVESTIGATION

- A. **Responsibility for case investigation:** It is the responsibility of the local health department (LHD) to investigate or arrange for investigation of suspected or confirmed cases as soon as is reasonably possible. A case investigation may include information collected by phone, in person, in writing, or through review of medical records or communicable disease report forms, as necessary and appropriate.
- B. **Required Documentation:**
1. Complete the WEDSS disease incident investigation report, including appropriate, disease-specific tabs.
 2. Upon completion of investigation, set WEDSS disease incident process status to "Sent to State."
- C. **Additional Investigation Responsibilities**
Determine whether the case is potentially outbreak-related and notify the Wisconsin Division of Public Health (DPH), Bureau of Communicable Diseases (BCD).

IV. PUBLIC HEALTH INTERVENTIONS AND PREVENTION MEASURES

- A. In accordance with Wis. Admin. Code § [DHS 145.05](#), local public health agencies should follow the methods of control recommended in the current editions of *Control of Communicable Diseases Manual*, edited by David L. Heymann, published by the American Public Health Association, and the American Academy of Pediatrics' *Red Book: Report of the Committee on Infectious Diseases*, unless otherwise specified by the state epidemiologist.
- B. Consult with BCD for use of antiviral medication for treatment or prophylaxis.
- C. Consult with BCD for appropriate isolation of the patient.

V. CONTACTS FOR CONSULTATION

- A. Local health departments and tribal health agencies:
<https://www.dhs.wisconsin.gov/lh-depts/index.htm>
- B. BCD, Communicable Diseases Epidemiology Section: 608-267-9003
- C. Wisconsin State Laboratory of Hygiene: 1-800-862-1013

VI. RELATED REFERENCES

- A. Heymann DL, ed. Influenza. In: *Control of Communicable Diseases Manual*. 20th ed. Washington, DC: American Public Health Association, 2015: 306-322
- B. Pickering LK, ed. Influenza. In: *Red Book: 2015 Report of the Committee on Infectious Diseases*. 30th ed. Elk Grove Village, IL: American Academy of Pediatrics, 2015: 476-493.
- C. Centers for Disease Control and Prevention website: <http://www.cdc.gov/flu>