

Communicable Disease Case Reporting and Investigation Protocol INFLUENZA-ASSOCIATED PEDIATRIC DEATH

I. IDENTIFICATION AND DEFINITION OF CASES

A. **Clinical Description:** An influenza-associated death is defined for surveillance purposes as a death resulting from a clinically compatible illness that was confirmed to be influenza by an appropriate laboratory or rapid diagnostic test. There should be no period of complete recovery between the illness and death. Influenza-associated deaths in all persons aged <18 years should be reported.

B. Laboratory Criteria:

Laboratory testing for influenza virus infection may be done on pre- or post-mortem clinical specimens, and include identification of influenza type A or B virus infections by a positive result by at least one of the following:

- Influenza virus isolation in tissue cell culture from respiratory specimens.
- Reverse-transcriptase polymerase chain reaction (RT-PCR) testing of respiratory specimens.
- Immunofluorescent antibody staining (direct or indirect) of respiratory specimens.
- Rapid influenza diagnostic testing of respiratory specimens.
- Immunohistochemical (IHC) staining for influenza viral antigens in respiratory tract tissue from autopsy specimens.

C. Wisconsin Surveillance Case Definition:

A death in a person <18 years old meeting the clinical case definition that is laboratory confirmed.

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 § <u>DHS 145.04 (3) (b)</u>. 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 § <u>DHS 145.04(1)</u>, persons licensed under Wis. Stat. ch. <u>441</u> or <u>448</u>, 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 <u>Appendix A</u>.
- 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

In accordance with Wis. Admin. Code § <u>DHS 145.05</u>, 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.

V. CONTACTS FOR CONSULTATION

- A. Local health departments and tribal health agencies: <u>https://www.dhs.wisconsin.gov/lh-depts/index.htm</u>
- B. Bureau of Communicable Diseases, 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