

Communicable Disease Case Reporting and Investigation Protocol RESPIRATORY SYNCYTIAL VIRUS (RSV)-ASSOCIATED HOSPITALIZATIONS

I. IDENTIFICATION AND DEFINITION OF CASES

A. Clinical Description: A RSV-associated hospitalization is defined clinically for surveillance purposes as an inpatient hospitalization resulting from a clinically compatible illness diagnosed as RSV. Symptoms of RSV vary but commonly include runny nose, cough, sore throat, fever, a decrease in appetite, and wheezing. There should be no period of complete recovery between the illness and hospitalization.

B. Laboratory Criteria:

Confirmatory laboratory evidence of RSV type A, B, or undifferentiated by at least one of the following:

- Isolation of respiratory syncytial virus by tissue cell culture
- Detection of respiratory syncytial virus nucleic acid by reverse-transcriptase polymerase chain reaction (RT-PCR) or other nucleic acid detection assay
- Detection of respiratory syncytial virus antigen by immunofluorescent antibody staining (direct or indirect)
- Detection of respiratory syncytial virus antigens by immunochromatographic or similar rapid laboratory test
- Detection of respiratory syncytial virus antigens from autopsy specimens by immunohistochemical (IHC) staining

C. Wisconsin Surveillance Case Definition:

A confirmed case is a patient who is hospitalized (>24 hours) as a result of a RSV compatible illness and with confirmatory laboratory evidence for RSV.

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 (form 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 RSV infection.

III. CASE INVESTIGATION

A. **Responsibility for case investigation**: It is the responsibility of the local health department 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."

IV. PUBLIC HEALTH INTERVENTIONS AND PREVENTION MEASURES

- A. 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.
- B. Consult with BCD for appropriate isolation precautions 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. Bureau of Communicable Diseases, Communicable Diseases Epidemiology Section: 608-267-9003
- C. Wisconsin State Laboratory of Hygiene: 800-862-1013

VI. RELATED REFERENCES

- A. Heymann DL, ed. Common Cold and Other Acute Viral Diseases. In: Control of Communicable Diseases Manual. 21st ed. Washington, DC: American Public Health Association, 2022: 117-122.
- B. Kimberlin DW, ed. *Respiratory Syncytial Virus*. In: *Red Book: 2021-2024 Report of the Committee on Infectious Diseases*. 32nd ed. Itasca, IL: American Academy of Pediatrics, 2018: 628-636.
- C. Centers for Disease Control and Prevention RSV website: https://www.cdc.gov/rsv/