Progress in Influenza Surveillance

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Over the past decade, DHEC has established a very robust influenza surveillance system. It includes the reporting of confirmatory tests by individual patient; lab-confirmed hospitalizations; influenza-associated deaths; rapid antigen tests (RAT); and voluntary Outpatient Influenza-like Illness Surveillance Network (ILINET) reporting providers. Each of these elements contributes important information that allows DHEC to characterize the severity and geographic spread and estimate the burden of influenza across the state during each annual flu season.

Hospitalizations and deaths help us monitor the epidemiology of severe influenza infections and provide an assessment of the severity of the influenza season.

Lab-confirmed cases and rapid tests aid us in identifying the type of influenza circulating in the state, detection of novel strains, monitoring influenza trends by county and regional levels, determining geographic spread of the virus, and guiding vaccination efforts.
ILINET data show us the percent of patient visits in an outpatient setting attributed to an influenza-like illness. ILI data is a vital component in determining geographic spread.

DHEC also monitors national data sources such as the National Respiratory and Enteric Virus Surveillance System as well as the data from a major influenza testing equipment manufacturer as supplements to the state-mandated requirements.

Each year, the List of Reportable Conditions (List) is reviewed to ensure that it will reflect the most appropriate conditions requiring public health surveillance at both the state and national level. In addition, each data element requested must serve a specific and justifiable purpose. For 2019, DHEC will no longer require the aggregate reporting of RAT. The reason for this decision is three-fold. First, the use of rapid molecular assays has significantly increased (lab-confirmed cases) providing more robust individualized data for influenza infections, e.g. age of patient, type of influenza, and geographic location. The second reason is RAT reporting only specified collecting positives and not total number of tests performed. Without this denominator data, we were unable to assess changes in provider testing practices or calculate percent positivity. Requiring practices to report the total number of tests performed, in addition to all the other requirements, was not an attractive option. Lastly, based upon the methodology adapted by Biggerstaff, M., et. al (2018), data from several past seasons were analyzed to determine if lab-confirmed influenza tests and RATs were correlated and characterized the severity of past influenza seasons the same. Findings noted from this evaluation concluded that RAT reporting could be eliminated with no loss of surveillance quality.

The rapid antigen test change will appear on the 2019 List of Reportable Conditions; however, providers can stop reporting the RAT to DHEC beginning with the 2018-2019 influenza season. All other influenza data elements remain on the List. For information regarding this reporting change, you can refer to: https://scdhec.gov/sites/default/files/media/document/10420-DHU-09-27-2018-FLU.pdf

**Recent Tuberculosis Control Trainings**

Vernita Wingate, LMSW, MPH  
TB Program Manager  
Clarissa A. Felima, MPH, CHES  
Health Educator  
Division of Tuberculosis

**Tuberculosis and Diabetes**

During August and September 2018, the Division of Tuberculosis (TB) Control partnered with the Carolinas Center for Medical Excellence (CCME) to coordinate Tuberculosis and Diabetes trainings to educate DHEC TB Control regional staff on the connection of the two morbidities and connect their patients with appropriate resources. Almost 40 people attend the one-day training held at the Richland County Health Department. DHEC offers the course annually.

**Advanced TB Today**

Since 2012, TB Control has coordinated an Advanced TB Today conference, which helps experienced TB Control program staff stay current on TB knowledge as well as learn new information and skills. TB Control hosted an Advanced TB Today conference at the Hyatt Place Greenville in Greenville, South Carolina on June 5-7, 2018. There were 32 attendees. Resources from the regional American Lung Association assisted in this effort.

**Tuberculosis Today**

DHEC partnered with the American Lung Association (ALA) to sponsor the Tuberculosis (TB) Today workshop October 15-17, 2018, at the Hyatt Place in Irmo, SC. TB Today is an annual course for healthcare workers who provide services to TB patients in South Carolina to develop a broad knowledge base in TB. It focuses on a practical approach to the current body of knowledge on which the treatment and control of tuberculosis is based. At the conference, 33 attendees represented their respective healthcare settings, including patient management, contact investigation, prevention, infection control, program management, supervision of staff involved in direct care, and professional education. Other professionals (e.g., social workers, health educators, managers, supervisors, etc.) are encouraged to apply to take the course.

If your facility is interested in a presentation or training on TB, please email us at TBControl@dhec.sc.gov with the subject line Requesting TB Training.
Updates to the School and Child Care Exclusion List for 2019

Tina Skinner, RN, BSN, MBA
Nurse Consultant
Division of Acute Disease Epidemiology

S.C. law requires schools to take measures to prevent the spread of disease in the school and childcare populations by limiting the attendance of students and staff with contagious or infectious diseases at school and school activities. SC Regulation #61-20 requires DHEC to publish in January of each year an Official School and Childcare Exclusion List of Contagious and Communicable Diseases, hereinafter referred to as the School and Childcare Exclusion List.

Students, employees and staff (including volunteers) who have been exposed to one or more of the conditions designated in these lists are to be excluded from school or childcare attendance until they meet the criteria to return to school or childcare.

The following updates were made to the School and Childcare Exclusion List for 2019:

- Shiga toxin-producing E. coli (STEC) cases are to return to school/work with documentation of two negative results.
- Typhoid fever cases may return to school/work with the documentation of three consecutive negative results.
- A brief description of minor illnesses and associated outbreak activities.

The School and Child Care Exclusion List for 2019 can be found at: https://www.scdhec.gov/sites/default/files/Library/CR-011634.pdf

Updates to the List of Reportable Conditions for 2019

Tashauna Lane
Data Security Officer/Surveillance System Trainer
Division of Acute Disease Epidemiology

South Carolina Law 44-29-10 and Regulation 61-20 require reporting of conditions on the Official List of Reportable Conditions in the manner prescribed by DHEC. Changes in reporting criteria for 2019 are listed below:

- Footnote 9: Carbapenem-resistant Enterobacteriaceae infections from all specimen types for the following species: E. Coli, Enterobacter, and Klebsiella was changed to read: Carbapenem-resistant Enterobacteriaceae infections from all specimen types.
- Footnote 13: All blood lead results are reportable within 30 days. Any elevated results (5 mcg/dL or greater) are reportable within seven days.

Updates to Reportable Conditions

- Positive rapid antigen detection tests for Influenza are no longer reportable.
- Drug susceptibility profile was added to Carbapenem-resistant Enterobacteriaceae (CRE).
- Drug susceptibility profile was added to Carbapenem-resistant Pseudomonas aeruginosa (CRPA).
WHAT TO REPORT
For all suspected and confirmed cases, report the following:

- Patient’s name
- Patient’s complete address, phone, county, date of birth, race, sex, last five digits of social security number
- Physician’s name and phone number
- Name, institution, and phone number of person reporting
- Disease or condition
- Date of diagnosis
- Symptoms
- Date of onset of symptoms
- Lab results, specimen site, collection date
- If female, pregnancy status
- Patient status: In childcare, food-handler, healthcare worker, childcare worker, nursing home, prisoner/detainee, travel in the past four weeks

HOW TO REPORT

HIV, AIDS, and STDs (excluding Hepatitis):
Do not fax HIV, AIDS, or STD results to DHEC.

- Call 1-800-277-0873;
- Submit electronically via DHEC’s web-based reporting system; or
- Mail to: Division of Surveillance & Technical Support Mills/Jarrett Complex Box 101106, Columbia, SC 29211

LEAD:

- Mail to: Bureau of Health Improvement & Equity, Lead Surveillance c/o Brian Humphries Sims-Aycock Building 2600 Bull Street, Columbia, SC 29201
- Fax: (803) 898-3236
- Call (803) 898-3641 to establish electronic reporting.

REPORTING REMINDERS

- Drug susceptibility profiles are no longer required for “Lab confirmed cases of Influenza.”
- Drug susceptibility profiles are no longer required for Campylobacterosis.
- Cyclosporiasis (Cyclospora) was changed to read: Cyclosporiasis (Cyclospora cayetanensis).
- Cyclosporiasis (Cyclospora cayetanensis) Specimen submission to the Public Health Laboratory is required. Ship three-day reportables within three days.
- Appropriate specimen types: A pure, low passage isolate submitted on a non-inhibitory, non-selective agar plate or slant is preferred. If available submit one original culture plate; was added to “Staphylococcus aureus, vancomycin-resistant or intermediate” with a VA > 6 MIC (VRSA/VISA).
- Footnote (10) was removed from Carbapenem-resistant Enterobacteriaceae (CRE).
- Footnote (10) was removed from Carbapenem-resistant Pseudomonas aeruginosa (CRPA).
- Babesiosis (Babesia microti) was changed to read: Babesiosis (Babesia spp.).
- Brucellosis (Brucella) was changed to read: Brucellosis (Brucella spp.).
- Cryptosporidiosis (Cryptosporidium) was changed to read: Cryptosporidiosis (Cryptosporidium spp.).
- Giardiasis (Giardia) was changed to read: Giardiasis (Giardia spp.).
- Malaria (Plasmodium) was changed to read: Malaria (Plasmodium spp.).
- Rocky Mountain Spotted Fever (Rickettsia rickettsii) (Spotted Fever group) was changed to read: Spotted Fever Rickettsiosis (Rickettsia spp).
- Influenza A, avian or other novel strain was changed to read: Influenza, avian or other Novel Strain.

CONDITIONS ADDED

- Candida Auris or suspected, has been added to reportable within 24 Hours by phone. Specimen submission to the Public Health Laboratory is required.

CONDITIONS REMOVED

- Trichinellosis (Trichinella spiralis) is no longer reportable.

FOOTNOTE (10)

- Footnote (10) was removed from Carbapenem-resistant Pseudomonas aeruginosa (CRPA).
- Footnote (10) was removed from Carbapenem-resistant Pseudomonas aeruginosa (CRPA).
- Footnote (10) was removed from Carbapenem-resistant Pseudomonas aeruginosa (CRPA).
**WHERE TO REPORT TUBERCULOSIS**

Report to the public health office (listed below) in the region in which the patient resides.

<table>
<thead>
<tr>
<th>Lowcountry</th>
<th>Midlands</th>
<th>Pee Dee</th>
<th>Upstate</th>
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<tr>
<td>Berkeley, Charleston, Dorchester&lt;br&gt;Office: (843) 719-4612&lt;br&gt;Fax: (843) 719-4778</td>
<td>Chester, Kershaw, Lancaster, Newberry, York&lt;br&gt;Office: (803) 909-7357&lt;br&gt;Fax: (803) 327-4391</td>
<td>Dillon, Georgetown, Horry, Marion&lt;br&gt;Office: (843) 915-8798&lt;br&gt;Fax: (843) 915-6504</td>
<td>Cherokee, Spartanburg, Union&lt;br&gt;Office: (864) 596-2227 ext. 108&lt;br&gt;Fax: (864) 596-3340</td>
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<tr>
<td>Allendale, Bamberg, Beaufort, Calhoun, Colleton, Hampton, Jasper, Orangeburg&lt;br&gt;Office: (843) 549-1516 ext. 222&lt;br&gt;Fax: (843) 549-6845</td>
<td>Aiken, Barnwell, Edgefield, Fairfield, Lexington, Richland, Saluda&lt;br&gt;Office: (803) 576-2870&lt;br&gt;Fax: (803) 576-2880</td>
<td>Chesterfield, Clarendon, Darlington, Florence, Lee, Marlboro, Sumter, Williamsburg&lt;br&gt;Office: (843) 934-2867&lt;br&gt;Fax: (843) 773-6366</td>
<td>Abbeville, Anderson, Greenwood, Laurens, McCormick, Oconee, Pickens&lt;br&gt;Office: (864) 260-5562&lt;br&gt;Fax: (864) 260-5564</td>
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<tr>
<td>Nights/Weekends/Holidays: (803) 898-0558 Fax: (803) 898-0685</td>
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**WHERE TO REPORT OTHER CONDITIONS**

Report all other conditions to the public health office (listed below) in the region in which the patient resides.

**Immediate and Urgent Reporting (TELEPHONE)**

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<tr>
<td>Berkeley, Charleston, Dorchester&lt;br&gt;Phone: (843) 953-0043</td>
<td>Kershaw, Lexington, Newberry, Richland&lt;br&gt;Phone: (803) 576-2749</td>
<td>Chesterfield, Darlington, Dillon, Florence, Marion, Marlboro&lt;br&gt;Phone: (843) 661-4830</td>
<td>Anderson, Oconee&lt;br&gt;Phone: (864) 260-5581</td>
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<tr>
<td>Beaufort, Colleton, Hampton, Jasper&lt;br&gt;Phone: (843) 549-1516 ext. 218</td>
<td>Chester, Fairfield, Lancaster, York&lt;br&gt;Phone: (803) 286-9948</td>
<td>Clarendon, Lee, Sumter&lt;br&gt;Phone: (803) 773-5511</td>
<td>Abbeville, Greenwood, McCormick&lt;br&gt;Phone: (864) 260-5581</td>
</tr>
<tr>
<td>Allendale, Bamberg, Calhoun, Orangeburg&lt;br&gt;Phone: (803) 268-5833</td>
<td>Aiken, Barnwell, Edgefield, Saluda&lt;br&gt;Phone: (803) 642-1618</td>
<td>Georgetown, Horry, Williamsburg&lt;br&gt;Phone: (843) 915-8800</td>
<td>Cherokee, Greenville, Laurens, Pickens, Spartanburg, Union&lt;br&gt;Phone: (864) 372-3133</td>
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<tr>
<td>Nights/Weekends&lt;br&gt;Phone: (888) 801-1046</td>
<td>Nights/Weekends&lt;br&gt;Phone: (803) 801-1046</td>
<td>Nights/Weekends&lt;br&gt;Phone: (843) 915-8845</td>
<td>Nights/Weekends&lt;br&gt;Phone: (866) 298-4442</td>
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**3-Day Reporting (MAIL or FAX)**

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<tr>
<td>Lowcountry&lt;br&gt;4050 Bridge View Drive, Suite 600&lt;br&gt;N. Charleston, SC 29405&lt;br&gt;Phone: (843) 953-0051</td>
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<tr>
<td>Midlands&lt;br&gt;2000 Hampton Street&lt;br&gt;Columbia, SC 29204&lt;br&gt;Phone: (803) 576-2993</td>
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<tr>
<td>Pee Dee&lt;br&gt;145 E. Cheves Street&lt;br&gt;Florence, SC 29506&lt;br&gt;Phone: (843) 915-6502</td>
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<tr>
<td>Upstate&lt;br&gt;200 University Ridge&lt;br&gt;Greenville, SC 29602&lt;br&gt;Phone: (864) 282-4373</td>
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This section’s layout was updated to reflect the changes in the telephone numbers for the Pee Dee region (Georgetown, Horry, Williamsburg). All conditions other than HIV, AIDS, STDs, Lead and TB must be reported to the public health office in the region in which the patient resides. Immediately and urgently reportable conditions must be reported by telephone. Conditions which are routinely reportable must be reported via mail, fax or submitted electronically via DHEC’s web-based reporting system.
Links for Disease Reporting Information

Reportable Diseases Page on DHEC website
www.scdhec.gov/health-professionals/report-diseases-adverse-events/south-carolina-list-reportable-conditions

PDF List of Reportable Conditions

SC DHEC Disease Reporting Form

Questions?

For questions about Disease Reporting or to discuss electronic disease reporting via DHEC’s electronic disease surveillance reporting system, call the DHEC Bureau of Disease Control in Columbia:

(803) 898-0861
Monday – Friday
8:30 a.m. – 5 p.m.

To learn about DHEC’s web-based reporting system, call:

1-800-917-2093
Monday – Friday
8:30 a.m. – 5 p.m.