

Respiratory Virus Surveillance Report¹



New Jersey Department of Health Communicable Disease Service

Week ending May 23, 2015 (MMWR week 20)

SYNOPSIS

	Influenza Activity Lev	vel ²
State Activ	ity Week ending 5/23:	
	LOW	Course Course
Current week	Last year: MODERATE	Marie me
Re	egional ³ Data	human and the state of the stat
Northwest	LOW	County County
Northeast	LOW	Contraction (Contraction)
Central West	LOW	Company Company
Central East	LOW	Curried or A. Carlot
South	LOW	V

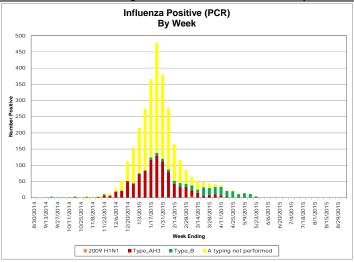
		ILI Activit	ty ⁴	
	P	ercent ILI/Absente	eeism	Baselines
	Current week (range by county)	Last week Current year	Current week Last year	Non-season ⁵ Season ⁶ (3 low, 3 high)
Long Term Care Facilities	0.31 (0.00, 1.32)	0.46	0.59	0.59 (0.59, 0.78)
Schools (absenteeism)	4.76 (0.65, 7.80)	4.32	4.14	3.63 (4.56, 4.95)
Emergency Departments	2.39 (0.00, 5.88)	2.26	2.00	2.44 (3.17, 4.16)

Viral Ac	ctivity ⁷		
	Current Week	Past 3 Weeks	Cumulative Total
Influenza H1N1 (2009)	0	1	12
Influenza H3N2	0	3	926
Influenza B	4	25	272
Respiratory Syncytial Virus (RSV)	2	15	3043
Rapid Influenza Tests	11	62	8025

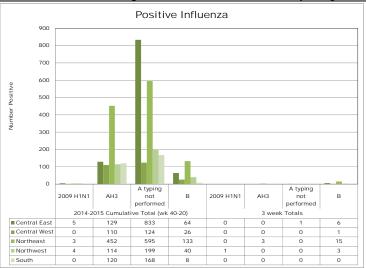
I	LINet P	Providers	
Current W	'eek	Previous W	⁷ eek
#of reporters	%ILI	#of reporters	%ILI
5	1.16	16	1.43

Virologic Surveillance⁷

Influenza Positive Specimens (PCR) - Result by Week



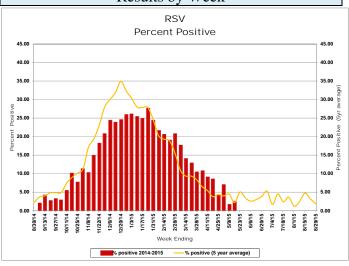
Influenza Positive Specimens (PCR)- Result by Region³



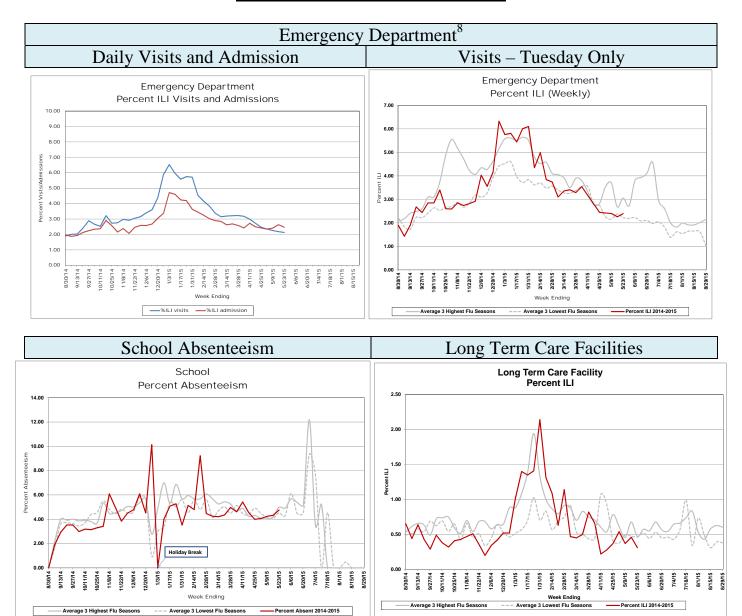
Influenza Rapid Antigen Result by Week

Rapid Influenza Tests Total Tested and Percent Positive 6000 45.

Respiratory Syncytial Virus (RSV) Results by Week



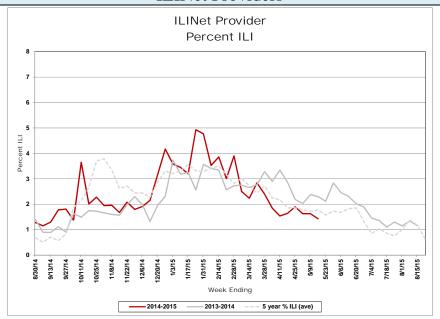
Influenza-like Illness Surveillance



Respiratory Outbreaks in Long Term Care Facilities⁹

Cumulative outbreaks 2014-2015 season	102
No. outbreaks last 3 weeks	0
Regions with recent outbreaks	N/A





For additional information regarding influenza surveillance please visit the following websites. http://nj.gov/health/flu/surveillance.shtml http://www.cdc.gov/flu/

Footnotes:

- 1. This report represents activity occurring in New Jersey related to influenza and RSV. In addition, reports of other circulating respiratory viruses or regarding illness severity (i.e., hospitalization) will be included when available.
- 2. Activity levels for the state and region are defined in Table 1 and 2 at the end of this document.
- 3. The following is a breakdown of counties contained within each public health region: Northwest: Morris, Passaic, Sussex, Warren; Northeast: Bergen, Essex, Hudson; Central west: Hunterdon, Mercer, Somerset; Central East: Middlesex, Monmouth, Ocean, Union; South: Atlantic, Burlington, Camden, Cape May, Salem, Cumberland, Gloucester
- 4. Influenza-like illness (ILI) is defined as fever (> 100°F [37.8°C], oral or equivalent) and cough and/or sore throat (in the absence of a known cause other than influenza). For long term care facilities, fever is defined as 2° above baseline temperature.
- 5. Non-season baseline is calculated by taking the average of statewide percentages of ILI for an 9 year (2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, and 2014) period during months when influenza is less likely to be circulating (May-August).
- 6. Three year seasonal averages are determined by calculating the average percent ILI/absenteeism for each influenza season (October to May). These averages are ranked and the three highest and lowest overall season averages were selected. The three highest and lowest numbers were then averaged to obtain a single high and single low value. The season which contribute to the high and low value vary by entity type and are as follows: LTCF (High: 08-09,09-10, 12-13; Low: 10-11,11-12,13-14), ED (High:08-09, 09-10,12-13; Low: 10-11, 11-12,13-14) and schools (High: 08-09, 10-11, 12-13; Low: 09-10, 11-12,13-14). A week by week average was also calculated using the average of the seasons listed above for each entity type.
- 7. Viral activity: Real-time polymerase chain reaction (PCR) results are obtained from electronic laboratory transmission submitted by acute care, commercial and public health laboratories to CDRSS. Rapid influenza test data and respiratory syncytial virus data are acquired from facilities reporting rapid influenza tests via the National Respiratory and Enteric Virus Surveillance System (NREVSS) or CDRSS ILI module. Counts for cumulative totals begin with week ending October 4, 2014. Three week count data includes current week and two prior weeks. Data presented for RSV and rapid influenza testing represent information for the week prior to the current report week.
- 8. Daily visits and admissions associated with ILI from emergency department data is collected via EpiCenter and Hippocrates. Prior to these systems, data on ILI visits were only recorded one day per week usually on Tuesday. This system is maintained as a large amount of historical data allows for better seasonal comparisons.
- 9. Only LTCF outbreaks reported to NJDOH that receive an outbreak number are recorded in this report.

	I	<u>Table 1</u> nfluenza Activity Level – Definitions for	State Ac	tivity
NJ Level	CSTE Level		<u>inition</u>	
		ILI Activity/Outbreaks		Lab Activity
	No Activity	ILI activity at or below baseline AND no detected outbreaks	AND	No lab confirmed cases
Low	Sporadic	Low ILI activity detected OR one lab confirmed outbreaks anywhere in the state	AND	Sporadic isolation of laboratory confirmed influenza
	Local	Increase in ILI activity OR two or more lab confirmed outbreaks in one public health region (Other regions not experiencing increased ILI activity)	AND	Recent (within 3 weeks) laboratory activity in the region with increased ILI
Moderate	Regional	Increase in ILI activity OR two or more lab confirmed outbreaks in at least 2 public health regions (Other regions not experiencing increased ILI activity)	AND	Recent (within 3 weeks) laboratory activity in the region with increased ILI
High	Widespread	Increase in ILI activity OR two or more lab confirmed outbreaks in > 2 public health regions	AND	Recent (within 3 weeks) laboratory activity in the region with increased ILI

	<u>Table 2</u> Influenza Activity Level – Definitions		lic Health Regions
NJ Level	Def ILI Activity/Outbreaks	<u>inition</u>	Lab Activity
Low	Low ILI activity detected OR one lab confirmed outbreaks anywhere in the region	AND	Sporadic isolation of laboratory confirmed influenza anywhere in the region
Moderate	Increased ILI activity in less than half of the counties in the region OR two lab confirmed outbreaks in the public health region	AND	Recent (within 3 weeks) laboratory activity in same counties of the region with increased ILI
High	Increased ILI activity in more than half of the counties in the region OR three or more lab confirmed outbreaks in the region	AND	Recent (within 3 weeks) laboratory activity in more than half of the counties in the region with increased ILI

Notes:

ILI activity: Systems used to detect increases in ILI activity include: ILINet (i.e., sentinel providers), school absenteeism data, ED ILI visits and admissions collected via Hippocrates and EpiCenter systems, LTCF ILI data, LTCF outbreak data, and information on influenza mortality (122 city, influenza associated death report).

Lab Activity: Virologic surveillance data from PHEL and commercial laboratories will be used as the primary data source for the above levels. However, rapid influenza test data will also be considered when determining the appropriate activity levels.

Communicable Disease Reporting and Surveillance System

NJ ACTIVE INFLUENZA-LIKE ILLNESS SURVEILLANCE STATISTICS SURVEILLANCE DATE: 05/19/2015



05/26/2015 8:05 AM

		Long Term Ca	re		Schools		Hospi	tal Emergency	Dept
COUNTY	# Enrolled	# Reports .	.•	# Enrolled	# Reports Rec'd	% Absent	# Enrolled	# Reports	⊒ %
May 19, 2015 MMWR WEEK 20		<u> </u>			<u> </u>				, and the second second
ATLANTIC	6	1	1.32	60	18	5.35	4	4	0.22
BERGEN	4	3	0.00	102	9	3.43	5	5	1.74
BURLINGTON	6	2	0.00	88	34	5.02	4	3	4.28
CAMDEN	0	0	0.00	2	0	0.00	7	6	3.20
CAPE MAY	5	0	0.00	11	6	4.23	1	1	2.54
CUMBERLAND	5	4	0.37	17	11	6.47	3	3	3.54
ESSEX	7	0	0.00	11	1	4.78	8	7	2.64
GLOUCESTER	3	0	0.00	8	3	7.80	2	2	1.76
HUDSON	6	0	0.00	73	17	5.06	6	5	1.21
HUNTERDON	4	2	0.38	8	7	3.04	1	1	5.68
MERCER	3	0	0.00	28	12	3.97	5	4	3.56
MIDDLESEX	9	1	0.35	28	12	4.07	6	6	2.29
MONMOUTH	6	2	0.00	18	11	5.79	5	5	2.25
MORRIS	0	0	0.00	1	0	0.00	4	4	0.57
OCEAN	1	0	0.00	11	1	7.69	4	4	3.29
PASSAIC	9	4	0.53	34	3	0.65	3	2	3.56
SALEM	0	0	0.00	10	1	4.32	1	0	0.00
SOMERSET	4	0	0.00	33	8	3.18	1	1	5.88
SUSSEX	5	1	0.00	9	1	2.22	2	2	0.00
UNION	2	0	0.00	74	1	1.75	5	4	1.01
WARREN	3	2	0.78	20	5	4.35	2	2	1.50
NW Region	17	7	0.56	64	9	2.04	11	10	1.83
NE Region	17	3	0.00	186	27	4.64	19	17	2.12
CW Region	11	2	0.38	69	27	3.43	7	6	4.30
CE Region	18	3	0.23	131	25	5.02	20	19	2.20
South Region	25	7	0.43	196	73	5.46	22	19	2.64
State Total	88	22	0.31	646	161	4.76	79	71	2.39

User Name: HALDEMAN, ANNMARIE Page 1 of 1

Communicable Disease Reporting and Surveillance System

NJ ACTIVE INFLUENZA-LIKE ILLNESS SURVEILLANCE STATISTICS SURVEILLANCE DATE: 05/19/2015





	RSV Tests		Flu Tests	
County	# Positive	Total Tests Performed	# Positive	Total Tests Performed
May 19, 2015 MMWR WEEK 20				
ATLANTIC	0	8	1	16
BERGEN	0	2	1	19
BURLINGTON	0	0	0	0
CAMDEN	0	2	0	29
CAPE MAY	0	1	0	3
CUMBERLAND	0	0	0	0
ESSEX	0	6	1	32
GLOUCESTER	0	4	2	28
HUDSON	0	5	0	15
HUNTERDON	0	6	0	14
MERCER	0	0	0	9
MIDDLESEX	0	24	0	14
MONMOUTH	2	20	4	106
MORRIS	0	2	0	9
OCEAN	0	4	0	10
PASSAIC	0	5	2	25
SALEM	0	0	0	0
SOMERSET	0	0	0	0
SUSSEX	0	0	0	0
UNION	0	9	0	0
WARREN	0	0	0	0
NW Region	0	7	2	34
NE Region	0	13	2	66
CW Region	0	6	0	23
CE Region	2	57	4	130
South Region	0	15	3	76
State Total	2	98	11	329