

Case Reporting Guidelines for (Novel) 2009 Influenza A (H1N1) Virus for Wisconsin Healthcare Providers and Laboratories Wisconsin Division of Public Health (DPH) – Sep 18, 2009

DPH has begun using the term “2009 influenza A (H1N1) virus” in place of “novel H1N1” or “Swine flu.”

This document describes Wisconsin disease reporting requirements for 2009 influenza A (H1N1) virus infections diagnosed beginning September 1, 2009.

Highlights:

- **Hospitals, clinics and healthcare providers must report hospitalizations and deaths in persons infected with 2009 influenza A (H1N1) virus, either by completing a case report form or entering the information into WEDSS. No case report form or WEDSS report is needed for non-hospitalized, non-fatal cases.**
- **Laboratories that report electronically must continue to report all confirmed and probable 2009 influenza A (H1N1) infections in Wisconsin residents. DPH will work with laboratories that conduct H1N1 testing and do not report electronically to identify alternative reporting procedures.**

Testing: Most people infected with 2009 influenza A (H1N1) virus will experience mild illness and do not need to be tested. DPH recommends 2009 H1N1 testing only for groups at high risk for complications of influenza or who could expose others at high risk. The Wisconsin State Laboratory of Hygiene (WSLH) restricts fee exempt testing to certain high-risk groups or when approved by local or state public health officials. A number of private laboratories offer fee-for-service 2009 H1N1 testing. Testing guidelines, treatment guidelines, and surveillance forms are available in the Health Professionals section of <http://pandemic.wisconsin.gov>.

Laboratory criteria for reporting:

- *Confirmed infection:* positive for 2009 influenza A (H1N1) virus using real-time RT-PCR.
- *Probable infection:* positive for influenza A virus but negative for human H1 and H3 subtypes using real-time RT-PCR. (*When tested, nearly 100% of probable infections are confirmed as 2009 H1N1 virus.*)

It is not necessary to report influenza A positive test results when sub-typing is not done, or influenza rapid antigen test results.

Case reporting: “Influenza A virus infection, novel subtypes” is a reportable condition in Wisconsin listed in Appendix A of Administrative Rule HFS 145. DPH continues to consider 2009 influenza A (H1N1) virus a novel subtype because a large proportion of the population lacks immunity. Public health reporting of 2009 H1N1 virus infections will continue through the 2009-2010 influenza season. In view of the large volume of case reports, DPH has established the following procedures:

Healthcare facility and provider reporting: *Hospitals, clinics, and other healthcare providers must report hospitalizations and deaths in persons with confirmed or probable 2009 influenza A (H1N1) virus infection. Other cases (i.e., not hospitalized and not fatal) no longer need to be reported by clinicians.* Reports should be submitted using the Wisconsin “Case Report Form for (Novel) 2009 Influenza A (H1N1) Virus Hospitalizations or Deaths” or entered online into the Wisconsin Electronic Disease Surveillance System (WEDSS). The most recent case report form is available in the Health Professionals section of <http://pandemic.wisconsin.gov>. For more information about online reporting via WEDSS, see <http://dhs.wisconsin.gov/WiPHIN/WEDSS>. It is not necessary to complete an Acute & Communicable Disease Report Form F44151 (formerly 4151).

Laboratory reporting *Laboratories that report electronically must continue to report all confirmed and probable 2009 influenza A (H1N1) infections in Wisconsin residents.* DPH will contact laboratories that are approved for H1N1 testing and do not report electronically to identify alternative reporting mechanisms which can include

computer-generated electronic or paper linelists or entry of information into a new online electronic laboratory reporting form (Please email wedig@mail.slh.wisc.edu for more information about online laboratory reporting).

As of September 2009, four Wisconsin laboratories are capable of diagnosing 2009 influenza A (H1N1) virus infections using RT-PCR: the Wisconsin State Laboratory of Hygiene, the Milwaukee Health Department Laboratory, the Midwest Respiratory Virus Program (a research lab based at the Medical College of Wisconsin), and the Marshfield Clinic Laboratory. QUEST and other national laboratories also have the ability to confirm 2009 influenza A (H1N1) infections, and additional laboratories are expected to add this test in the near future, including laboratories with the ability to identify influenza A viruses that are non-subtypeable (not human H1 or human H3).

Disease outbreak reporting: The Health Code requires that suspected disease outbreaks be reported immediately by telephone or fax to the local health officer.

For the latest Wisconsin influenza surveillance data go to <http://pandemic.wisconsin.gov>.