



CD Info



Richard M. Daley, Mayor

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Bechara Choucair, MD, Commissioner

CDInfo is a surveillance newsletter intended to promote prevention of morbidity and mortality by providing useful data and practical recommendations for clinicians, laboratorians, and infection control personnel who diagnose, treat or report infectious diseases in Chicago.

Morbidity for selected infectious diseases and events, Chicago, 2005 - 2009

<i>Reportable Disease or Event</i>	2005	2006	2007	2008	2009 ¹	5-year median
Cryptosporidiosis	24	27	26	19	16	24
<i>E. coli</i> O157:H7 Disease	4	16	5	5	6	5
Foodborne disease outbreaks ²	11	14	20	14	10	14
<i>H. influenzae</i> (type b) Disease (invasive)	2	1	1	0	0	1
<i>H. influenzae</i> (non-type b) Disease (invasive)	21	19	24	30	34	24
Hepatitis A (acute)	56	40	40	38	43	40
Hepatitis B (acute)	99	70	59	52	50	59
Hepatitis C (acute)	9	3	3	0	0	3
Histoplasmosis	17	21	18	26	21	21
Legionellosis	22	25	36	37	31	31
Listeriosis	7	10	8	5	10	8
Lyme Disease	10	14	7	11	4	10
Meningococcal Disease (invasive) ³	13	12	21	29	7	13
Mumps	5	73	30	14	10	14
Pertussis	78	50	26	76	48	50
Pneumococcal Disease (invasive) in child aged < 5 yrs.	17	28	26	25	18	25
Salmonellosis	305	280	413	289	287	289
Shigellosis	144	148	141	229	98	144
Streptococcal Disease, Group A (invasive)	79	91	99	100	86	91
Tuberculosis Disease (active)	329	287	259	214	202	259
Typhoid Fever	9	7	4	4	3	4
Varicella	100	137	55	70	50	70
West Nile Virus Infection	41	29	11	4	1	11
Yersiniosis	6	6	9	6	5	6

¹ As of May 1, 2010. Counts may change as additional investigative information is obtained.

² A foodborne disease outbreak is defined as an incident in which two or more persons experience a similar illness and have no other exposures that could account for their illnesses other than consuming the same meal or food item, or consuming items from the same food service establishment.

³ Totals include confirmed cases and cases meeting the Centers for Disease Control and Prevention's definition of a probable case.

Reportable Infectious Diseases and Conditions in Illinois



Stop and Report: It is the responsibility of physicians, physician assistants, nurses, nurse aides or any other person having knowledge of any of the following diseases, **confirmed or suspected**, to report the case to the Chicago Department of Public Health (CDPH) within the specified time frame via INEDSS (**Illinois National Electronic Disease Surveillance System**) †

¹⁻⁶ = indicates that a phone call should be made to specified program (see below) in conjunction with an INEDSS report.

‡ = indicates conditions for which IDPH currently requires an isolate or clinical materials to be submitted to the IDPH Laboratory.*

Report Immediately:

(within 3 hours)

Class I(a)

Any unusual case or cluster of cases that may indicate a public health hazard^{1,7}
 Any suspected bioterrorism threat or event^{1,7}
 Anthrax^{1,7,‡}
 Botulism, foodborne^{1,7}
 Influenza A, Novel Virus^{4,7}
 Plague^{1,7,‡}
 Brucellosis^{1,7,‡} (if suspected to be a bioterrorist event or part of an outbreak)
 Q-fever^{1,7,‡} (if suspected to be a bioterrorist event or part of an outbreak)
 Smallpox^{1,7}
 Severe Acute Respiratory Syndrome^{1,7}
 Tularemia^{1,7,‡} (if suspected to be a bioterrorist event or part of an outbreak)

Report Within 24 hours:

Class I(b)

Botulism: intestinal, wound, and other¹
 Chickenpox (varicella)
 Cholera^{1,‡}
 Diphtheria^{4,‡}
 Enteric *Escherichia coli* infections (O157:H7, STEC, EHEC, EPEC, ETEC)[‡]
 Foodborne or waterborne illness¹
 Haemophilus influenzae, meningitis and other invasive disease[‡]
 Hantavirus pulmonary syndrome¹
 Hemolytic uremic syndrome, post diarrheal^{1,‡}
 Hepatitis A²
 Measles^{4,7}
 Mumps
Neisseria meningitidis, meningitis and invasive disease^{1,7,‡}
 Pertussis (or whooping cough)^{4,‡}
 Poliomyelitis⁴
 Rabies, human^{1,7}
 Rabies, potential human exposure^{1,7}
 Rubella
 Smallpox vaccination, complications of^{1,7}
 Staphylococcus aureus, Methicillin resistant (MRSA) clusters of 2 or more cases in a community setting¹
 Staphylococcus aureus, Methicillin resistant (MRSA) occurring in infants under 61 days of age
 Staphylococcus aureus infections with intermediate or high level resistance to Vancomycin^{1,7,‡}
 Streptococcal infections, Group A, invasive and sequelae to Group A streptococcal infections[‡]
 Typhoid fever^{1,‡}
 Typhus¹

Report Within 7 Days:

Class II

AIDS
 Arboviral Infection (including, but not limited to, Dengue fever, California encephalitis, St. Louis encephalitis and West Nile Virus)[‡]
 Brucellosis[‡]
 Chancroid
 Chlamydia
 Creutzfeldt-Jakob Disease (CJD)
 Cryptosporidiosis
 Cyclosporiasis
 Giardiasis
 Gonorrhea
 Hepatitis B and Hepatitis D
 Hepatitis C
 Histoplasmosis
 HIV infection
 Influenza, Deaths in persons less than 18 years of age
 Legionellosis[‡]
 Leprosy
 Leptospirosis[‡]
 Listeriosis[‡]
 Malaria[‡]
 Ophthalmia neonatorum (gonococcal)
 Psittacosis
 Q-fever[‡]
 Salmonellosis (other than typhoid)[‡]
 Shigellosis[‡]
Streptococcus pneumoniae, invasive disease in children less than 5 years
 Syphilis
 Tetanus
 Tickborne Disease, including ehrlichiosis, anaplasmosis, Lyme disease, and Rocky Mountain spotted fever
 Toxic shock syndrome, due to staphylococcus aureus infection
 Trichinosis
 Tuberculosis
 Tularemia[‡]
 Vibriosis (Non-cholera *Vibrio* infections)[‡]
 Yersiniosis

† <https://www.idphnet.com>; IDPH Chicago Laboratory, 2121 W. Taylor St, Chicago, IL. 60612, (P) 312-793-1322

1. Communicable Disease Surveillance: (312) 746-5925 or (312) 746-5377
2. Communicable Disease Hepatitis Surveillance: (312) 746-6197
3. Sexually Transmitted Infection Surveillance: (312) 413-8047
4. Vaccine Preventable Disease Surveillance: (312) 746-5911

5. Tuberculosis Surveillance: (312) 746-5380
6. HIV/AIDS Surveillance: (312) 747-9614 or (312) 747-9613
7. During normal business hours, cases may be reported by calling the corresponding program. On weekends, holidays, after hours, or if no one is available to take your call, reports may be made by calling 311 and asking for the communicable disease physician on call.

All reports are confidential and should include the reportable disease, physician contact information and patient demographics. Information reportable by law and allowed by HIPAA CFR §164 512(b)

West Side Center for Disease Control, 2160 W. Ogden Ave, Chicago, IL 60612 Phone: (312) 746-5380 Fax: (312) 746-6388

as of 5/11/2010