



CD Info



Rahm Emanuel, Mayor

June 2011

CD and Immunization Programs

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, 2006 - 2010

<i>Reportable Disease or Event</i>	2006	2007	2008	2009	2010 ¹	5-year median
Cryptosporidiosis	27	26	19	16	35	26
<i>E. coli</i> O157:H7 Disease	16	5	5	6	4	5
Foodborne disease outbreaks ²	14	20	14	10	7	14
<i>H. influenzae</i> (type b) Disease (invasive)	1	1	0	0	1	1
<i>H. influenzae</i> (non-type b) Disease (invasive)	19	24	30	34	39	30
Hepatitis A (acute)	35	31	36	40	28	35
Hepatitis B (acute)	46	28	36	28	36	36
Hepatitis C (acute)	3	3	0	0	0	0
Histoplasmosis	21	18	26	21	13	21
Legionellosis	25	34	27	29	36	29
Listeriosis	10	8	5	10	4	8
Lyme Disease	14	7	11	3	11	11
Meningococcal Disease (invasive) ³	12	21	29	7	7	12
Mumps	73	30	14	10	8	14
Pertussis	50	26	76	48	98	50
Pneumococcal Disease (invasive) in child aged < 5 yrs.	28	26	25	18	17	25
Salmonellosis	280	413	289	288	289	289
Shigellosis	148	141	229	97	107	141
Streptococcal Disease, Group A (invasive)	91	99	100	86	95	95
Tuberculosis Disease (active)	287	259	214	202	161	214
Typhoid Fever	7	4	4	3	6	4
Varicella	137	55	70	50	59	59
West Nile Virus Infection	29	11	4	1	9	9
Yersiniosis	6	9	6	5	6	6

¹ As of May 25, 2011. 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 (*Vibrio cholera* O1 or O139)^{1,‡}

Diphtheria^{4,‡}

Enteric *Escherichia coli* infections

(O157:H7, STEC, EHEC, EPEC, ETEC)[‡]

Foodborne or waterborne illness¹

Haemophilus influenza, meningitis and

other invasive disease[‡]

Hantavirus pulmonary syndrome¹

Hemolytic uremic syndrome, post diarrheal^{1,‡}

Hepatitis A²

Influenza-associated intensive care unit hospitalization⁴

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[‡]

Leptospirosis[‡]

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

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 5/31/2011