The Flu Rate for WEEK 18 is: 0% Among FRI Samples (0/17)

Weeks 40-18 Flu +/Total sampled:

Total 85/803
Lovell FHCC 21/128
NMCSD 2/34
NBHCKM 1/39
NH Camp Pendleton 8/139
NTC Health Clinic 1/27
29 Palms (RBNH) 46/316
Branch Health Clinic Yuma 6/120

Scope of the Report
This report represents cumulative influenza data generated under this protocol through 05 May, 2017 (week 18). Number of samples collected and laboratory confirmed influenza cases are charted over time by week of collection. A positive case is defined as a study subject who provided a specimen that tested positive on an RT-PCR assay or by viral culture for influenza A or B.

Scope of the Study
This document reports on an FRI (Febrile Respiratory Illness) surveillance study conducted at the Lovell Federal Health Care Center Great Lakes (FHCC), Naval Hospital Camp Pendleton (NHCP), Naval Medical Center San Diego (NMCSD), Naval Branch Health Clinic Kearny Mesa (NBHCKM), Naval Branch Health Clinic, Naval Training Center (NTC), Branch Health Clinic Yuma (BHCY), Robert E. Bush Naval Hospital, 29 Palms (RBNH), and Pacific Rim Surveillance Hub-U.S. Naval Medical Center Yokosuka, Japan. The study was initiated in November 2007. The study operates under IRB-approved protocol # NHRC.2007.0024. Subject enrollment criteria include: (1) age >6 months, (2) is a patient at the clinic in which subject is recruited, (3) meets case definition. Case definition for FRI (febrile respiratory illness): (1) subjective fever or temperature ≥ 100.5 °F and (2) cough or sore throat. Subjects provide a nasal or nasopharyngeal swab specimen. NHRC performs an RT-PCR assay and viral culture for influenza A, B, adenovirus and several other pathogens. Viral culture is also performed. NHRC is collaborating with developers of new rapid flu diagnostics in similar protocols with an aim to facilitate the availability of better FDA-approved point-of-care influenza assays. These studies are conducted under separate protocols, but reference data testing may be incorporated into issues of this surveillance report.

Contact Information
Principal Investigator: Dr. Chris Myers
Program Manager: Erin Hansen
Study Coordinators: Michelle Ricketts & Mina Jiang
Statistician: Christian Hansen
US Military Treatment Facilities: Laboratory identified pathogens among FRI Beneficiary surveillance participants.
FRI Surveillance Among DoD Beneficiaries
Other National and Local Civilian Surveillance Activities
Summaries of 2015-2016 season

US Nationwide: Percentage of Visits for Influenza-like Illness (ILI) Reported by the U.S. Outpatient Influenza-like Illness Surveillance network (ILINet)

Centers for Disease Control and Prevention 1600 Clifton Road Atlanta, GA 30329-4027 USA, 1-800-CDC-INFO (800.232.4636)

San Diego County

Figure 1. Percent of Emergency Department Visits for Influenza-like Illness by Week and FY

Current Week 15 (ending 4/15/2017)
- 19 new influenza detections reported
- 3% influenza-like illness (ILI) among emergency department visits
- 3 influenza-related deaths reported this week
- 7% of deaths registered with pneumonia and/or influenza

Virus Characteristics

<1% 9.1% 1.2% 79.8%
Influenza A (H1N1)pdm09
Influenza A (H1N1) Seasonal
Influenza B
Influenza A/B

San Diego County / Health & Human Services Agency / Public Health Services Epidemiology and Immunization Services Branch (619) 692-8499, EpiDiv.HHSA@sdcounty.ca.gov

City of Chicago

Figure 1. Number of influenza-associated ICU hospitalizations reported for Chicago residents, for the current season (2016-2017) by influenza type, October-May

Figure 2. Percent of emergency department visits attributed to influenza-like illness based on manual reporting by individual hospitals, Chicago, by week for the current season (2016-2017) and previous three seasons, October-May

CHICAGO DEPARTMENT OF PUBLIC HEALTH
Percent of emergency department visits attributed to influenza-like illness based on manual reporting as determined by individual hospitals, Chicago, by week

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