



# Epi Monthly

Florida Department of Health in Miami-Dade County

September 2018

Vol 19, Issue 9

## This Month in Public Health

- September is National Preparedness Month. This year's theme—"Disasters Happen, Prepare Now, Learn How"—calls to mind interdisciplinary and proactive approaches to preparedness that ensure that our communities are well-equipped to respond effectively to natural disasters, disease outbreaks, and other emergencies. For more information on how to better prepare yourself and your communities, please visit the following partner websites: the [Environmental Protection Agency \(EPA\)](#), the Centers for Disease Control and Prevention (CDC) [Office of Public Health Preparedness and Response](#), and the Department of Homeland Security's [Ready.gov](#) page.
- September also celebrates Healthy Aging Month. The [CDC Healthy Aging Research Network \(CDC-HAN\)](#) develops and evaluates public health programs focused on preserving and promoting the health of older adults. The [CDC](#) is also working with community partners across the nation to address challenges, chronic disease management and end of life planning as our population ages.
- If you haven't done so already, it's time to get ready for this year's flu season. The Florida Department of Health (DOH) encourages everyone to get vaccinated against influenza early in the season as per CDC recommendations. This year, Miami-Dade County Public Schools have partnered with [Healthy Schools](#) to provide in-school flu vaccination clinics, giving all students access to a [free flu vaccine](#). Speak to your healthcare provider today and schedule your flu shot or click [here](#) for help finding a flu shot near you.

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### Healthy Aging in Miami-Dade County

By: Alyssa Falise

Over the coming decades, the United States population is expected to change with the proportion of older adults increasing exponentially. In fact, for the first time in American history, it is expected that older adults will outnumber children by 2035, with an estimated 78 million older adults and 76.7 million children under the age of 18.<sup>1</sup> This change in the country's demographics can be attributed to numerous factors. The Baby Boomer generation is aging; by 2030, it is anticipated that 61 million will be aged 66 – 84 and 9 million will be 85 years old or older.<sup>2</sup> Also, advances in healthcare, treatments, and public health have allowed for the infant mortality rates to drop significantly and life expectancies to rise over the years.

Miami-Dade County, much like the rest of the country, has experienced steady increases in the older adult population. Between 2013 and 2017, the number of older adults (aged 65 years or older) increased by 16.7%.<sup>3</sup> To ensure that older adults are living a safe and healthy life, the Consortium for a Healthier Miami-Dade's Elder Issues/Mayor's Initiative on Aging was formed in 2006. The committee focuses on community education, linking older adults to service organizations, retirement planning to improve quality of life, and strengthening policies that encourage healthy environments.<sup>4</sup>

If you're interested in learning more about the Elder Issues Committee, please visit their website here: <https://www.healthymiamidade.org/committees/elder-issues-mayors-initiative-on-aging/>.

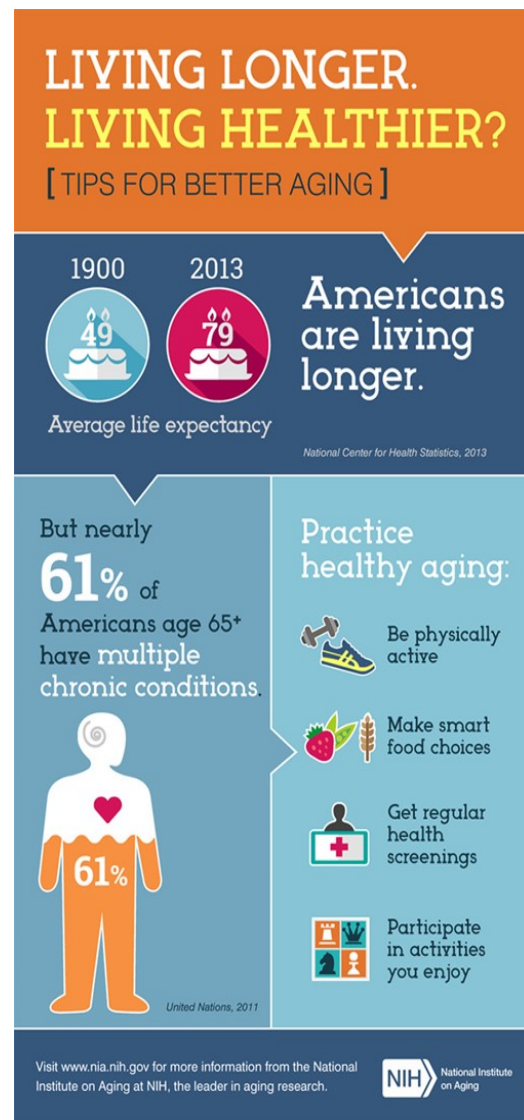
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<sup>1</sup><https://www.census.gov/newsroom/press-releases/2018/cb18-41-population-projections.html>

<sup>2</sup>Knickman, J. R., & Snell, E. K. (2002). The 2030 Problem: Caring for Aging Baby Boomers. *Health Services Research*, 37(4), 849-884. doi:10.1034/j.1600-0560.2002.56.x

<sup>3</sup><http://www.flhealthcharts.com/>

<sup>4</sup><https://www.healthymiamidade.org/committees/elder-issues-mayors-initiative-on-aging/>



### Spread the Word, Not the Flu:

#### What's New for the 2018-2019 Influenza Season

By: Isabel Griffin

Influenza (flu) is a contagious respiratory illness caused by influenza viruses.<sup>1</sup> The viruses infect the nose, throat, and sometimes the lungs, causing mild to severe illness, and at times can be fatal. Symptoms of influenza commonly include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, fatigue, and sometimes diarrhea and vomiting.<sup>1</sup>



**SICK WITH FLU? KNOW WHAT TO DO!**

Influenza (or flu) is a contagious respiratory illness caused by flu viruses. Most people with flu have mild illness and do not need medical care or antiviral drugs. If you get flu symptoms, in most cases, you should stay home and avoid contact with others except to get medical care.

**KNOW THE SYMPTOMS OF FLU**

Flu viruses can cause mild to severe illness, and at times can lead to death. The flu is different from a cold. The flu usually comes on suddenly.

People who have flu often feel some or all of these symptoms: Fever\* or feeling feverish/chills, cough, sore throat, runny or stuffy nose, muscle or body aches, headaches, fatigue (tiredness). Some people may have vomiting and diarrhea. This is more common in children.

\* It's important to note that not everyone with flu will have a fever.

**TAKE ANTIVIRAL DRUGS IF YOUR DOCTOR PRESCRIBES THEM!**

Antiviral drugs can be used to treat flu illness. Antiviral drugs can make illness milder and shorten the time you are sick. They also can prevent serious flu complications.

CDC recommends that antiviral drugs be used early to treat people who are very sick with the flu and people who get flu symptoms who are at high risk of serious flu complications, either because of their age or because they have a high risk medical condition.

**STAY HOME WHEN SICK**

When you are sick, limit contact with others as much as possible. Remember to cover your nose and mouth with a tissue when you cough or sneeze, and throw tissues in the trash after you use them. Stay home for at least 24 hours after your fever is gone except to get medical care or for other necessities.

\*Your fever should be gone for 24 hours without the use of a fever-reducing medicine before resuming normal activities.

[www.cdc.gov/flu/takingcare.htm](http://www.cdc.gov/flu/takingcare.htm) #FIGHT FLU

Last year's flu season (2017-2018) was the first season to be classified as "high severity" across all age groups, meaning that a certain age group was not more affected by the virus.<sup>2</sup> By the end of 2018, a total of 179 pediatric deaths had been reported to the Centers for Disease Control and Prevention (CDC) during the 2017/2018 season of which 80% occurred in children who had not received the flu vaccine.<sup>2</sup>

The "trivalent" influenza vaccine, which covers two Influenza A strains and one Influenza B strain, was modified this year to cover the viruses that research indicates will be most common during this upcoming 2018/2019 season. For 2018-2019, three-component vaccines are recommended to contain: A/Michigan/45/2017 (H1N1)pdm09-like virus, A/Singapore/INFIMH-16-0019/2016 A (H3N2)-like virus (Victoria lineage) virus (updated from last year).<sup>3</sup> The four component "quadrivalent" vaccine will include the three aforementioned viruses, plus an additional B virus called B/Phuket/3073/2013-like virus (B/Yamagata lineage).<sup>3</sup>

Last year, antiviral resistance also remained low. The CDC tested 1,147 flu A (H1N1), 2,354 flu A (H3N2), and 1,119 flu B viruses specimens for resistance to antiviral medications (oseltamivir, zanamivir, peramivir).<sup>2</sup> Eleven (1.0%) of flu A (H1N1 09pndm) viruses were resistant to oseltamivir and peramivir, but were sensitive to zanamivir.<sup>2</sup> These findings indicate that these drugs continue to be recommended treatment options for illness during the 2018/2019 season.

While seasonal flu viruses are detected year-round in the United States, flu viruses are most common during the fall and winter with increases occurring in October, peaks between December and February, and activity lasting until May.<sup>4</sup> In Miami-Dade County, the Florida

Department of Health in Miami-Dade County monitors emergency department (ED) chief complaint data for visits related to Influenza-like-illness (ILI).

Flu vaccination is the best way to prevent the flu, in addition to taking everyday preventive actions to stop the spread of germs: avoiding close contact with sick people, wash your hands with soap and water, and avoid touching your eyes, nose, and mouth.<sup>5</sup> The CDC currently recommends receiving the flu vaccine at the start of flu season in October. If you, your co-worker, or family member is sick, encourage them to see their doctor to be tested, and if needed, receive treatment for the flu (antivirals), as well as limit their contact with other people (i.e. stay home from work or school until fever free for at least 24 hours) to prevent the spread of the virus.<sup>5</sup>

**References**

- <sup>1</sup><https://www.cdc.gov/flu/keyfacts.htm>
- <sup>2</sup>[www.cdc.gov/flu/about/season/flu-season-2017-2018.htm](https://www.cdc.gov/flu/about/season/flu-season-2017-2018.htm)
- <sup>3</sup><https://www.cdc.gov/flu/about/season/flu-season-2018-2019.htm>
- <sup>4</sup><https://www.cdc.gov/flu/about/season/flu-season.htm>
- <sup>5</sup><https://www.cdc.gov/flu/consumer/prevention.htm>

# Rabies Surveillance, Prevention, and Control—Miami-Dade County, 2018

By: Ana Torrecilla, Edhelene Rico, Jenna Nelson, Alyssa Falise, and Isabel Griffin

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## Background

Rabies is a preventable viral disease of mammals most often transmitted through the bite of a rabid animal. Animal to human transmission is rare; however, if an individual becomes infected and begins to exhibit symptoms, the likelihood of survival is low as rabies is one of the few viruses in the world that can cause fatal illness in humans if left untreated. Rabies infection, however, is preventable.<sup>1</sup>

In the United States, 23 cases of human rabies have been reported in the past decade (2008-2017).<sup>2</sup> In Florida, it is estimated that at least 60,000 residents and visitors are bitten each year by a domestic or wild animal. Dogs are the major sources of animal bites followed by cats, rodents, raccoons, bats, and other species.<sup>3</sup> Florida reported 77 fatal human rabies cases between 1881 and 2013. Most of these cases were among children exposed to rabid dogs and cats. A *rabies virus exposure* is any bite, scratch, or other contact in which saliva or nervous tissue of a suspect or known rabid animal enters an open or fresh wound or comes in contact with mucous membranes by entering the eye, mouth, or nose of another animal or person.

## Human clinical rabies

Rabies in humans affects multiple organ systems and most characteristically presents as a viral encephalitis with illness progressing in five stages: incubation period, prodrome, acute neurologic stage, coma, and recovery or death. Incubation ranges from 9 days to a year or more after exposure; however, the majority of cases occur 20-90 days after rabies virus exposure.<sup>3</sup>

## Post-exposure prophylaxis

Human rabies can be prevented by eliminating the exposure to rabid animals or rapidly assessing the exposure for prompt treatment of wound care and post-exposure prophylaxis (PEP). It is crucial that public health officials receive accurate and timely information to guide decision-making to start PEP in potentially exposed humans and determine management of potentially exposed animal.<sup>4</sup> If a possible exposure to rabies is suspected in a previously unvaccinated individual, PEP is recommended. For additional information on PEP recommendations, please see Appendix A: Rabies Post-Exposure Prophylaxis (PEP) Administration Guidance and Schedule for Healthcare Providers.

## Pre-exposure prophylaxis

Pre-exposure immunization is recommended for those with potential occupational exposures to rabies (i.e. veterinary staff, animal control officers, wildlife workers, disaster animal response, laboratorians, etc.) and for individuals traveling to rabies endemic areas.

## Animals at high risk for rabies exposure

In the state of Florida, the most frequently reported rabid domestic mammals are cats and dogs, while the most common wildlife sources of rabies are raccoons, bats, and foxes.<sup>5</sup> As such, domesticated dogs and cats are required by law to be vaccinated against rabies in the state of Florida, a requirement which protects household animals from wildlife exposures to rabies.<sup>5</sup> Chapter 828.30, Florida Statutes, "Cruelty to Animals" requires that all dogs, cats, and ferrets be vaccinated by a licensed veterinarian against rabies with a United States Department of Agriculture approved vaccine. The law also states that dogs, cats, or ferrets, regardless of vaccination, that bite or scratch an individual would need to be captured and observed for 10 days for signs and symptoms of rabies.<sup>3</sup> If during this time, the animal becomes ill then it should be evaluated by a veterinarian and reported immediately to the health department. If the signs and symptoms suggest rabies infection, the animal should be euthanized, and the head should be sent for rabies testing at the Bureau of Public Health Laboratories. Additionally, any stray dog, cat, or ferret that poses a potential exposure to an

individual may be euthanized immediately and sent for testing. Other animals that expose humans should be managed depending on the species, exposure, presence of confirmed rabies in the area, animal health status, and potential for exposure to rabies.

## Surveillance

Animal or human rabies, along with possible exposure to rabies, are reportable to the Florida Department of Health upon initial suspicion or laboratory test order. The Florida Department of Health in Miami-Dade County (DOH Miami-Dade) monitors the transmission of rabies from animals to humans through the investigation and follow-up all individuals exposed to a suspected rabid animal. Public health officials investigate human and pet rabies exposure incidents and discuss appropriate treatment recommendations with the health care provider. Contact tracing investigations are conducted for laboratory positive rabies results to find all possible person or animals exposed. Cases that receive or are recommended to receive PEP are reported to the Florida Department of Health Bureau of Epidemiology and the Centers for Disease Control and Prevention (CDC).

## Epidemiology of animal bites/exposures in Miami-Dade County

Between January 1 and September 27, 2018, DOH Miami-Dade received 1,298 reports of animal bites/exposures among Miami-Dade County residents, of which 254 met case definition as a possible exposure (defined in Rule 64D-3.028, Florida Administrative Code as “a person receiving rabies prophylaxis due to an exposure, rabies testing, isolation or quarantine of the animal causing the exposure.”<sup>6</sup> Among reported animal bites/exposures, 53.4% occurred among women, and 58.2% occurred among individuals of Hispanic ethnicity. Median age was 32 (range 0 to 102).

The vast majority (1107, 85.2%) of exposures were bites with most individuals sustaining a single bite/wound in a specific area (878, 67.6%). Among individuals with a single exposure site, bites/exposures to the arm or hand were most frequently reported (429, 48.9%) followed by leg or foot (254, 27.9%). High priority bites/exposures, defined as those occurring to the head or neck, occurred in 14.6% of all reports, regardless of if the individual sustained bites/wounds in a single area or multiple areas. Among individuals with a single exposure site, bites/exposures to the arm or hand were most frequently reported (429, 48.9%) followed by leg or foot (254, 27.9%).

**Table 1.** Characteristics of individuals reporting animal bites/exposures—Miami-Dade County, January 1-September 27, 2018.

	Frequency n	Percent (%)
<b>Case Classification</b>		
Confirmed	254	(19.6)
Not a Case	1045	(80.5)
<b>Gender</b>		
Female	693	(53.4)
Male	605	(46.6)
Unknown	1	(0.1)
<b>Age group</b>		
0-4	258	(19.9)
5-17	213	(16.4)
18-44	316	(24.3)
45-64	256	(19.7)
65+	256	(19.7)
<b>Race/ethnicity</b>		
Non-Hispanic White	164	(12.6)
Non-Hispanic Black	124	(9.5)
Hispanic	756	(58.2)
Other	12	(0.9)
Unknown	243	(18.7)
<b>Type of exposure</b>		
Sleeping in a room with a bat	2	(0.2)
Bite	1107	(85.2)
Saliva	4	(0.3)
Scratch	23	(1.8)
Unknown	163	(15.6)
<b>Exposure site</b>		
1 Exposure Site	878	-
Arm or hand	429	-
Face, mouth, eyes, head or neck*	110	-
Leg or foot	245	-
Torso	17	-
Other	77	-
>1 Exposure Sites	154	-
Face, mouth, eyes, head or neck*	80	-
Unknown	267	-
* Denotes High Priority		
<b>PEP recommended</b>		
Yes	181	(13.9)
No	958	(73.8)
Unknown	160	(12.3)
<b>PEP initiated among those recommended</b>		
Yes	69	(38.1)
No	8	(4.4)
Unknown	104	(57.5)



High priority bites/exposures, defined as those occurring to the head or neck, occurred in 14.6% of all reports, regardless of if the individual sustained bites/wounds in a single area or multiple areas. Among the 254 individuals who met case definition as a possible exposure, 181 (71.3%) were recommended PEP of whom 69 (38.1%) initiated treatment.

Among all reported animals involved in potential animal-to-human rabies exposures, dogs accounted for the majority of events (1044, 80.4%), followed by cats (186, 14.3%) and other animals, such as raccoons, monkeys, rats, and bats (0.1%). While the majority of involved animals were owned (775, 59.7%), over a quarter of animals were of unknown ownership status, indicating that they could have been owned, stray, or wild. Among the owned animals (n=775), vaccination status was unknown in the majority of reports (445, 57.4%).

### Recent Miami-Dade County rabies alerts

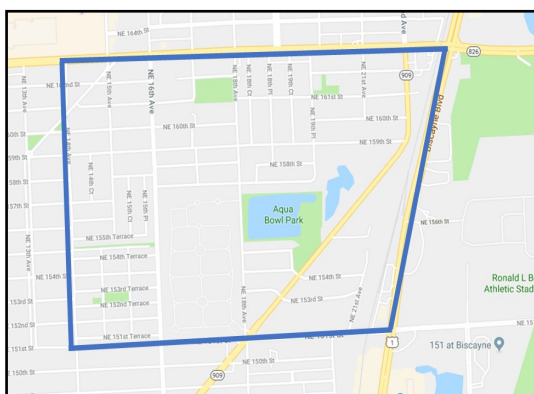
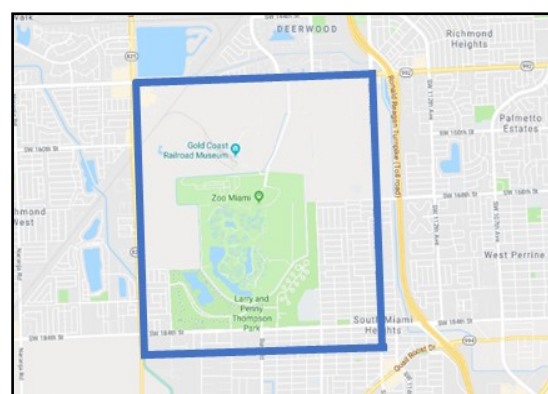
On September 17, 2018, DOH Miami-Dade announced an additional raccoon that had tested positive for rabies, making it the sixth rabies-positive raccoon in the county since May 18, 2018.<sup>7</sup> All were identified in a small area of Kendall (SW 152nd Street to the North, SW 187th Street to the South, SW 117th Avenue to the East, to SW 137th

Avenue to the West). This notification extended the previous rabies alert for an additional 60 days to November 16, 2018. All six raccoons were found with neurological symptoms consistent with rabies. There have been no known human exposures associated with these alerts.

On September 25, 2018, DOH Miami-Dade confirmed a cat to be rabies positive, making it the seventh rabid animal in the county in 2018.<sup>8</sup> The cat was an unvaccinated pet that developed neurological symptoms while in quarantine. Four humans were exposed and received prophylaxis due to exposure to the cat's saliva. In response to this new confirmed rabid animal, an additional rabies alert was set for 60 days (ending Nov. 24) for the following area: NW 163rd Street to the North, NE 151st Street to the South, Biscayne Blvd to the East, and NE 14th Ave to the West.

**Table 2.** Characteristics of animals involved in animal bites/exposures and rabies investigations—Miami-Dade County, January 1-September 27, 2018.

	Frequency n	Percent (%)
<b>Animal Type</b>		
Bat	1	(0.1)
Cat	186	(14.3)
Dog	1044	(80.4)
Human	1	(0.1)
Monkey	6	(0.5)
Mouse	3	(0.2)
Opossum	2	(0.2)
Rabbit	2	(0.2)
Raccoon	10	(0.8)
Rat	5	(0.4)
Other	11	(0.9)
Unknown	4	(1.9)
<b>Animal ownership status</b>		
Owned	775	(59.7)
Stray	128	(9.9)
Wild	24	(1.9)
Unknown	372	(28.6)
<b>Vaccination among owned animals</b>		
Yes	220	(28.4)
No	110	(14.2)
Unknown	445	(57.4)
<b>Animal sent for testing</b>		
Yes	1	(0.1)
No	1140	(87.8)
Unknown	158	(12.2)



**Left.** Rabies alert area in Kendall (alert period ending November 16, 2018 pending no additional rabies identification in the area).

**Right.** Rabies alert area in North Miami Beach (alert period ending November 24, 2018 pending no additional rabies identification in the area.)

## Miami-Dade County rabies alert recommendations

During the rabies alert, DOH Miami-Dade has made the following recommendations for residents and visitors:

- Keep rabies vaccinations up to date for all pets. Under Florida State Statute § 828.30 (2018), **vaccination is required for dogs, cats, and ferrets in Florida.**
- Keep your pets under direct supervision so they do not come in contact with wild animals. If your pet is bitten by a wild animal, seek veterinary assistance for the animal immediately and contact Miami-Dade Animal Services at 3-1-1.
- Call 3-1-1 to report any stray dogs in your neighborhood or private property owners can hire a nuisance wildlife trapper for removal of wildlife. For a list of wildlife trappers, visit <https://public.myfwc.com/HGM/NWT/NWTSearch.aspx>
- Do not handle, feed, or unintentionally attract wild animals with open garbage cans or litter.
- Do not leave food sources out for wildlife such as pet food or unsecured garbage.
- Avoid contact with stray and feral animals.
- Never adopt wild animals or bring them into your home.
- Teach children never to handle unfamiliar animals, wild or domestic, even if they appear friendly.
- Prevent bats from entering living quarters or occupied spaces in homes, churches, schools, and other similar areas, where they might come in contact with people and pets.
- **Persons who have been bitten or scratched by wild or domestic animals should seek medical attention and report the injury to the Florida Department of Health in Miami-Dade County at 305-470-5660.**

For further information on rabies, please visit <http://miamidade.floridahealth.gov/index.html> or call the Florida Department of Health in Miami-Dade County at 305-470-5660, or Animal Services at 3-1-1. For information on the latest updates to the rabies alerts, please visit <http://miamidade.floridahealth.gov/alerts.html>.

## Animal bite reporting

Do you have a patient that has been bitten by or exposed to an animal potentially exposed to rabies virus? Did you know that the Florida Administrative Code Chapter 64D-3 requires that animal bites to humans by a potentially rabid animal be reported to the health department by a healthcare provider the next business day of the event? Reporting animal bites to DOH Miami-Dade is very important as it serves as an early warning system and can tell us if there is a problem with rabies in Miami-Dade County. If you have a patient that was bitten by a potentially rabid animal, we ask you to complete the Animal Bite Report Form and fax it to our confidential fax at 305-470-5533 or electronic fax at 786-732-8714.

**Please note:** *The data presented in this report are provisional and subject to change. The most recent edition of the Animal Bite Report Form (last updated March 2018) is included in Appendix B.*

### References

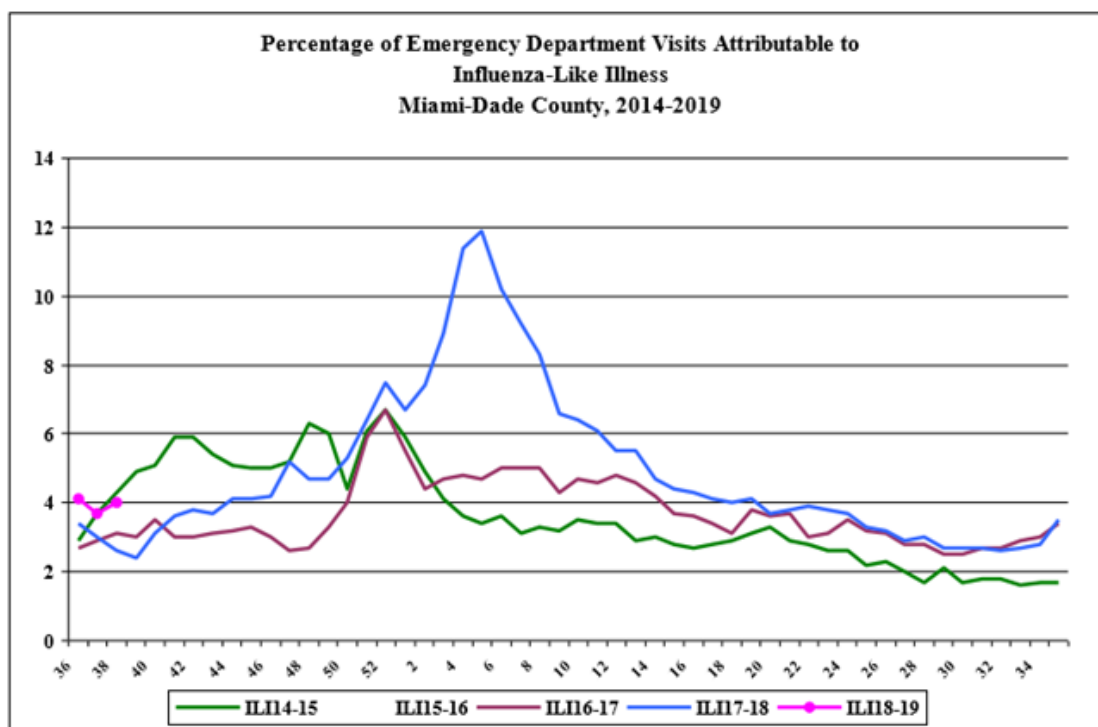
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4. National Association of State Public Health Veterinarians. "Rabies Compendium." (Retrieved from: [Nasphv.org/documents/NASPHVRabiesCompendium.pdf](http://www.nasphv.org/documents/NASPHVRabiesCompendium.pdf).)
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6. Florida Department of Health. "Health Care Practitioners Reporting Guidelines for Reportable Diseases and Conditions in Florida." October 20, 2016. (Retrieved from: [http://www.floridahealth.gov/diseases-and-conditions/disease-reporting-and-management/\\_documents/reportable-diseases/\\_documents/guidelines-health-care.pdf](http://www.floridahealth.gov/diseases-and-conditions/disease-reporting-and-management/_documents/reportable-diseases/_documents/guidelines-health-care.pdf).)
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# Florida Department of Health in Miami-Dade County Epidemiology, Disease Control and Immunization Services

## Influenza Like Illness Surveillance Report

On a daily basis, all of Miami-Dade County's emergency department (ED) hospitals electronically transmit ED data to the Florida Department of Health. This data is then categorized into 11 distinct syndromes. The influenza-like illness (ILI) syndrome consists of fever with either cough or sore throat. It can also include a chief complaint of "flu" or "ILI". This season's 2017-2018 data is compared to the previous 4 influenza seasons (2013-2014, 2014-2015, 2015-2016, 2016-2017).

### Influenza-Like-Illness, All Age



Across all ages, there were 32,114 ED visits during this period; among them 1,267 (4.0%) were ILI. At the same week of last year, 2.6% of ED visits were ILI.

### PARTICIPATE IN INFLUENZA SENTINEL PROVIDER SURVEILLANCE

#### Florida Department of Health in Miami-Dade County NEEDS Influenza Sentinel Providers!

Sentinel providers are key to the success of the Florida Department of Health's Influenza Surveillance System. Data reported by sentinel providers gives a picture of the influenza virus and ILI activity in the U.S. and Florida which can be used to guide prevention and control activities, vaccine strain selection, and patient care.

- Providers of any specialty, in any type of practice, are eligible to be sentinel providers.
- Most providers report that it takes **less than 30 minutes a week** to compile and report data on the total number of patients seen and the number of patients seen with influenza-like illness.
- Sentinel providers can submit specimens from a subset of patients to the state laboratory for virus isolation **free of charge**.

For more information, please contact  
**Lakisha Thomas** at 305-470-5660.





## Miami-Dade County Monthly Report Select Reportable Disease/Conditions August 2018

Diseases/Conditions	2018 Current Month	2018 Year to Date	2017 Year to Date	2016 Year to Date
<b>HIV/AIDS</b>				
AIDS*	40	310	285	371
HIV	144	938	883	1088
<b>STD</b>				
Infectious Syphilis*	34	294	257	284
Chlamydia*	1191	8927	8568	8369
Gonorrhea*	365	2825	2289	1922
<b>TB</b>				
Tuberculosis**	7	77	60	63
<b>Epidemiology, Disease Control &amp; Immunization Services</b>				
<b>Epidemiology</b>				
Campylobacteriosis	59	570	444	410
Chikungunya Fever	1	1	0	0
Ciguatera Poisoning	4	23	7	3
Cryptosporidiosis	9	28	28	21
Cyclosporiasis	0	0	4	2
Dengue Fever	3	6	3	9
Escherichia coli, Shiga Toxin-Producing	10	100	24	7
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	15	122	93	151
Influenza Novel Strain	0	0	0	0
Influenza, Pediatric Death	0	1	1	0
Legionellosis	6	35	23	11
Leptospirosis	1	1	0	0
Listeriosis	2	4	6	5
Lyme disease	1	2	3	2
Malaria	1	8	5	6
Meningitis (except aseptic)	0	7	4	2
Meningococcal Disease	0	0	6	0
Salmonella serotype Typhi (Typhoid Fever)	1	3	1	1
Salmonellosis	118	523	470	426
Shigellosis	23	219	77	53
Streptococcus pneumoniae, Drug Resistant	1	13	20	3
Vibriosis	0	5	3	6
West Nile Fever	0	0	0	0
<b>Immunization Preventable Diseases</b>				
Measles	0	3	4	0
Mumps	0	6	4	4
Pertussis	1	14	26	15
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	6	54	25	51
<b>Hepatitis</b>				
Hepatitis A	6	13	84	26
Hepatitis B (Acute)	11	33	30	13
<b>Healthy Homes</b>				
Lead Poisoning	11	125	182	70

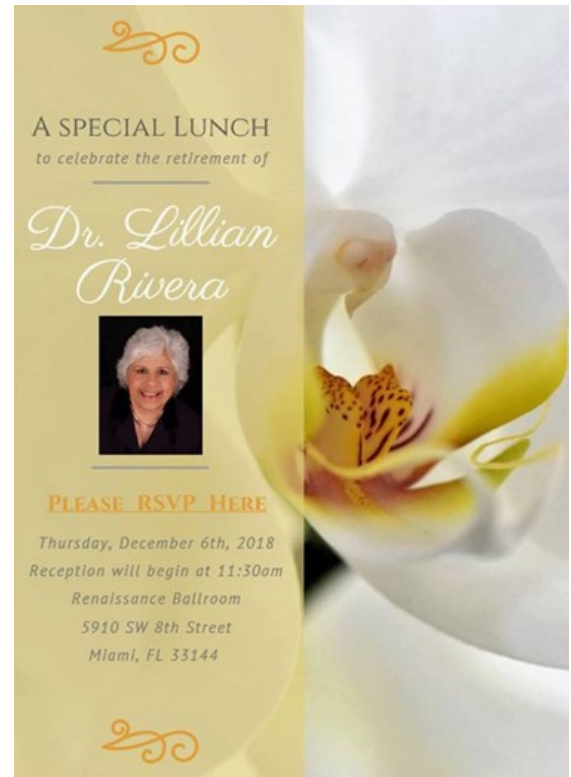
\*Data is provisional at the county level and is subject to edit checks by state and federal agencies.

\*\* Data on tuberculosis are provisional at the county level.

Data on EDC-IS includes Confirmed and Probable cases.

## What's New at DOH Miami-Dade

- As we prepare to say farewell to our esteemed Administrator and Health Officer for the Florida Department of Health in Miami-Dade County, Dr. Lillian Rivera, we cordially invite our community partners to join us for a special lunch reception on Thursday, December 6 to celebrate Dr. Rivera's retirement. To RSVP for this event, kindly click on the invitation to the right and follow the prompts.
- The Florida Department of Health in Miami-Dade County is hosting the 2018 Community Partner Fair and Conference on Friday, October 19th. This year's theme, "Shaping the Future of Public Health," brings together speakers and exhibitors from academia, government, the non-profit sector, and many more. The event is open to the public but registration is required. Registration fee is \$25 per guest. To register, guests may register and pay at: <http://www.healthcouncil.org/guest-registration>.



## Did You Know?



September 28 marks World Rabies Day. Since 2007, many countries have joined together to raise awareness about rabies and bring together partners to enhance prevention and control efforts worldwide. This year's theme, "Share the message. Save a Life," highlights the importance of education and awareness in the fight against rabies. For more information on this initiative, please visit: <https://www.cdc.gov/worldrabiesday/index.html>.



Rabies: Share the message.  
**SAVE A LIFE.**



### About the Epi Monthly Report

The Epi Monthly Report is a publication of the Florida Department of Health in Miami-Dade County: Epidemiology, Disease Control & Immunization Services. The publication serves a primary audience of physicians, nurses, and public health professionals. Articles published in the Epi Monthly Report may focus on quantitative research and analysis, program updates, field investigations, or provider education. For more information or to submit an article, please contact Danielle Fernandez at 305-470-6980 or [danielle.fernandez@flhealth.gov](mailto:danielle.fernandez@flhealth.gov).



### Rabies Post-Exposure Prophylaxis (PEP) Administration Guidance and Schedule for Healthcare Providers

All rabies PEP should begin with immediate thorough cleansing of all wounds with soap and water. If available, a viricidal agent such as a povidone-iodine solution should be used to irrigate the wounds. Patient tetanus vaccination status should also be determined.

The rabies PEP regimens provided are applicable for all age groups, including children, and pregnant women. Vaccine should never be administered in the gluteal area or near the human rabies immunoglobulin (HRIG) administration site. Day 0 is the day the first dose of vaccine is given, not the day the bite occurred. In cases that unexpected, extended delays in administering rabies PEP have occurred (i.e. patient delay in seeking medical care) up to one year following the exposure, PEP should be administered as soon as possible if the patient is not demonstrating signs of encephalitis. In cases that delay is greater than one year from the exposure or that the patient is demonstrating signs of encephalitis, please consult with your county health department.

If rabies PEP is not administered according to the recommended schedule, please consult with Florida Department of Health in Miami-Dade @ 305-470-5660 to determine the appropriate schedule for completing the series.

#### Administration schedule for persons previously vaccinated in the U.S. since 1982

Product	Route	Site	Dose	#Doses	Schedule
Rabies Vaccine	IM	Deltoid	1.0mL	2	Day 0 and 3

#### Administration schedule for persons not previously vaccinated

Product	Route	Site	Dose	#Doses	Schedule
Human Rabies Immune Globulin	Infiltrate wound	Wound, if feasible; distant from vaccine (deltoid or quadriceps)	20 IU/kg or 9 IU/lb (0.06mL/lb)	1	Day 0
Rabies Vaccine	IM	Deltoid (or anterolateral thigh for small children)	1.0mL	4	Day 0, 3, 7, and 14
Rabies Vaccine for immunosuppressed patients	IM	Deltoid (or anterolateral thigh for small children)	1.0mL	5	Day 0, 3, 7, 14, and 28 with titer

Details for national rabies PEP guidelines can be found in:  
 CDC. Use of a Reduced (4-Dose) Vaccine Schedule for Post-exposure Prophylaxis to Prevent Human Rabies Recommendations of the Advisory Committee on Immunization Practices. MMWR 2010;59(RR-2):1-9.

CDC. Humans Rabies Prevention - United States, 2008 Recommendations of the Advisory Committee on Immunization Practices. MMWR Early Release 2008;57:1-28.





## Animal Bite Report Form

Epidemiology, Disease Control and Immunization Services (EDC-IS)  
 PH: 305-470-5660 • Fax: 305-470-5533

The Florida Administrative Code Chapter 64D-3 requires that animal bites to humans by a potentially rabid animal be reported to the health department next business day of the event.

Date of Report: _____
Reporting Agency: _____
Person completing Form: _____
Telephone: _____

### A. Person Bitten (Victim)

Name (Last, First): _____	DOB: _____	Age: _____	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female, pregnant? <input type="checkbox"/> No <input type="checkbox"/> Yes
Race: <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Unknown	Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> non-Hispanic <input type="checkbox"/> UNK		
Address: _____	City: _____	State: _____	Zip: _____
Telephone: _____	Other telephone/email: _____		
Parent/Guardian name (if victim is minor): _____	Insurance: <input type="checkbox"/> No <input type="checkbox"/> Yes, name: _____	<input type="checkbox"/> UNK	
Medicaid: <input type="checkbox"/> No <input type="checkbox"/> Yes			
Victim relationship to animal: <input type="checkbox"/> No relation <input type="checkbox"/> Occupational <input type="checkbox"/> Owner <input type="checkbox"/> UNK			
Place of attack: _____		Time and date of attack: _____	
Circumstances of attack: <input type="checkbox"/> Playful <input type="checkbox"/> Provoked <input type="checkbox"/> Sick/Hurt <input type="checkbox"/> K-9 (Police Action) <input type="checkbox"/> Unknown <input type="checkbox"/> Other:			
Type of exposure: <input type="checkbox"/> Bite <input type="checkbox"/> Scratch <input type="checkbox"/> Saliva to mucus membrane or open cuts <input type="checkbox"/> handling/contact <input type="checkbox"/> Other:			
Wound(s) location: <input type="checkbox"/> Eyes <input type="checkbox"/> Face <input type="checkbox"/> Head <input type="checkbox"/> Mouth <input type="checkbox"/> Neck <input type="checkbox"/> Arm <input type="checkbox"/> Hand <input type="checkbox"/> Abdomen <input type="checkbox"/> Leg <input type="checkbox"/> Torso/Trunk/Chest <input type="checkbox"/> Other:			
<u>Wound care Information</u>		<u>Anti-Rabies Post-Exposure Prophylaxis (PEP)</u>	
Patient washed wound? <input type="checkbox"/> No <input type="checkbox"/> Yes, how long after exposure: _____		<i>Note: raccoon, fox, bats or if animal not found PEP is recommended</i>	
Physician: saw patient on (date): _____		Recommended? <input type="checkbox"/> No <input type="checkbox"/> Yes	
washed/flushed wound? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes, by whom: _____	
gave tetanus prophylaxis? <input type="checkbox"/> No <input type="checkbox"/> Yes		Initiated? <input type="checkbox"/> No <input type="checkbox"/> Yes, date: _____	
gave antibiotics? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes, which one? <input type="radio"/> RIG (Immunoglobulin)	
sutured wound? <input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="radio"/> Rabies Vaccine	
provided other treatment? _____			
ER visit? <input type="checkbox"/> No <input type="checkbox"/> Yes		Hospitalized? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Comments/Notes: _____			

### B. Animal Information

Type of animal: <input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Other: _____	Description (breed, color, etc.): _____
Animal was: <input type="checkbox"/> Owned <input type="checkbox"/> Stray <input type="checkbox"/> Wild <input type="checkbox"/> UNK	Behavior: <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal <input type="checkbox"/> UNK
Animal owner name (custodian): _____	Telephone: _____
Address: _____	City: _____ State: _____ Zip: _____
Animal ever vaccinated against rabies? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> UNK If yes, vaccinated by: <input type="checkbox"/> Owner <input type="checkbox"/> Vet <input type="checkbox"/> UNK	

*Health Department use only:*

- Case # \_\_\_\_\_
- Incident reported to animal services control?  No  Yes, date: \_\_\_\_\_
- Animal vaccinated?  No  Yes, type of vaccine:  1<sup>st</sup> vaccine  1-year  3-year  UNK  other: \_\_\_\_\_ Recent vaccination date: \_\_\_\_\_

Updated: March 2018