

# Texas Influenza Surveillance 101

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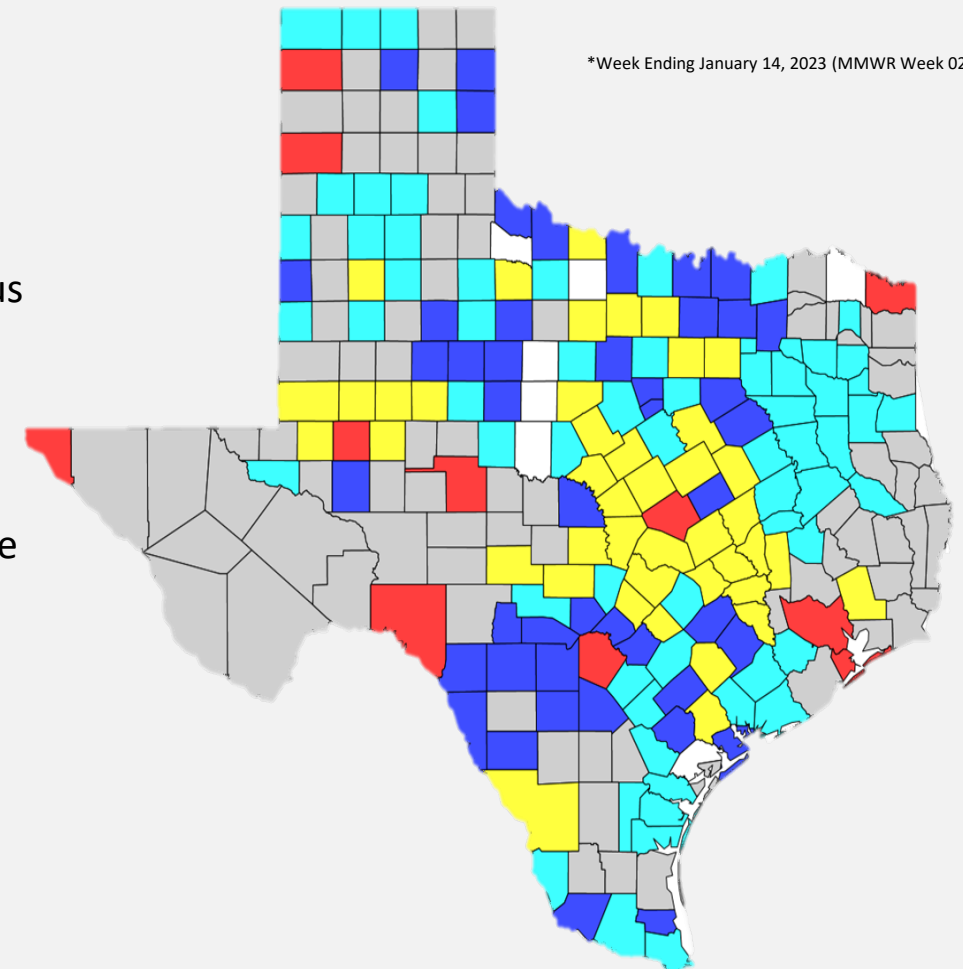
# Presentation Outline

- Texas Influenza Surveillance Overview
- Texas Influenza Surveillance Structure
- Texas Influenza Surveillance Components
- Texas Influenza Required Reporting
- Texas Influenza Surveillance Rolls



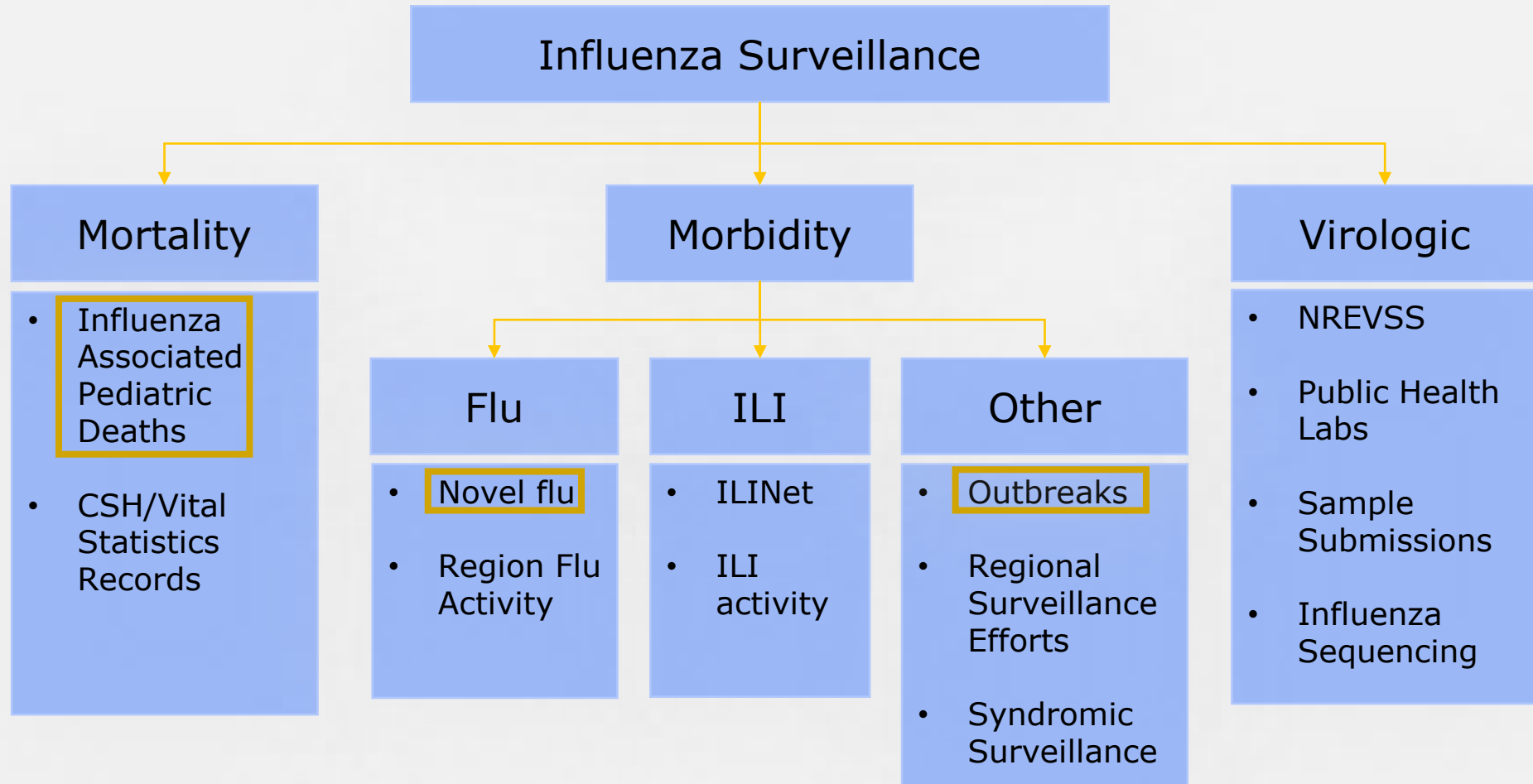
# Texas Influenza Surveillance

- Flu surveillance structure
  - Voluntary reporting from providers
    - Syndromic Surveillance (Essence/TxS2)
    - ILINet (Influenza-like Illness Network)
    - NREVSS (National Respiratory and Enteric Virus Surveillance System)
    - Qualtrics Regional Reporting
- Data is aggregated on a weekly basis and published online through a static pdf report.
- 3 Conditions that are REQUIRED to be reported
  - Influenza Associated Pediatric Mortality
  - Novel Influenza
  - Respiratory Disease Outbreaks



Texas Department of State  
Health Services

# Influenza Surveillance Structure



 On Notifiable Conditions List

# Texas Influenza Surveillance: ILINet

- What it is
  - CDC Program
  - Voluntary program
    - Aggregate counts of ILI
    - Age breakouts of ILI patients
    - Total patient seen
  - Weekly Report
  - Can be Reported by Central Office

## Who Reports It?

- Providers, (central office)
- Directly report ILI to ILINet/CDC
- Enrolled by flu surveillance coordinator

- Role in Surveillance
  - Aggregated statewide; weekly
  - Create trends for comparison across years
  - Highlight ILI activity



# Texas Influenza Surveillance: NREVSS

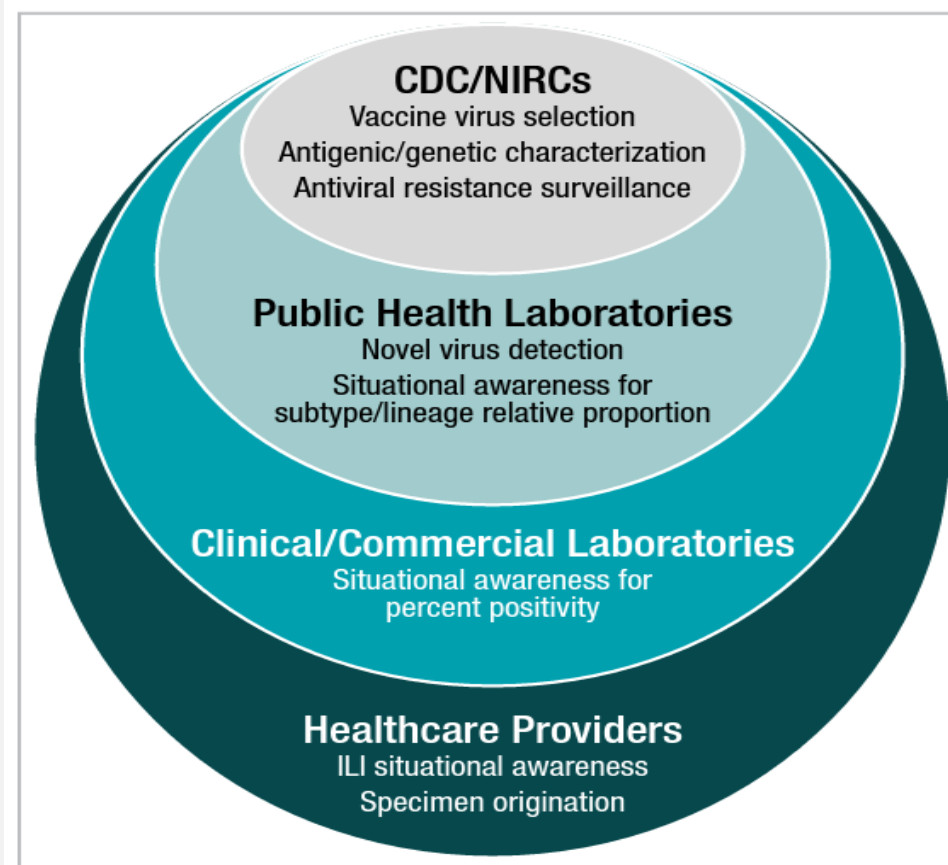
- What it is
  - Flu Testing
    - NREVSS
    - Public Health Laboratories (PHL) /Laboratory Response Network (LRN)
  - Samples are submitted to LRN's using G2V forms
    - Facility labs likely already have these forms
- Role in Surveillance
  - Situational Awareness
    - Preparedness and Response
  - Identifies confirmed influenza
  - Provides trends of positivity over time

## Who Reports It?

- Lab Facilities
- Directly report data to NREVSS/CDC
- Enrolled by flu surveillance coordinator & CDC



# Texas Influenza Surveillance: NREVSS



**Figure 1.** The US influenza virologic surveillance system is a tiered system. The same specimens answer various clinical and surveillance questions throughout the system with only a subset of specimens advancing to each subsequent level.

# Texas Influenza Required Reporting

- Influenza Associated Pediatric Mortality
- Novel Influenza
- Outbreaks



# Required Reporting: Pediatric Mortality

- **Reporting:**
  - Required within 1 business day
  - Notify Central and Regional Office
  - Use of Case Report Form and National Electronic Disease Surveillance System (NEDSS) reporting database
    - Provide any medical records and other forms to central/regional office for review
- **Case:**
  - Less than 18 years with influenza infection listed as an associated cause of death
  - Confirmatory testing
    - Rapid, PCR, culture, etc.
  - No period of recovery between illness and death
- **Central Office**
  - Once reviewed, case is also entered into CDC database as well as approved in NEDSS

# Required Reporting: Novel Influenza

- Reporting:
  - Required immediate reporting
    - When a facility believes they have a possible novel influenza case
  - Notify Central and Regional Office immediately
    - 24/7 number if after hours
- Case:
  - Consulting with physicians
    - Has the patient
      - Traveled out of the US in the last 10 days
      - Had recent contact with poultry, fowl, swine, raw milk
      - Been vaccinated for the current season
      - Presenting with unexpected or unusually severe illness
    - Any testing results?
      - Encourage PCR testing if possible
      - Get sample to LRN/PHL for testing
    - Until PHL testing is return the sample case and sample are of 'public health interest'.
  - PHL testing that results in an 'unsubtypeable' result, then sample is presumptive positive
  - Case should be entered into NEDSS if samples are collected for testing

# Required Reporting: Outbreaks

- Reporting:
  - Required reporting in the “most expeditious means available”.
  - Use of the Respiratory Outbreak Report Form
- Case:
  - Outbreaks are identified by facilities and dependent on historical knowledge
    - Generally – a sudden increase in cases over the normal background rate
    - This varies by facility
  - Education of reporting is key

# In Review: Surveillance Reporting Roles

## Timeline for Voluntary Surveillance Reporting

Day	ILINet Reporters	Non-ILINet Reporters	Local Health Department (LHD)	Regional Health Department (RHD)	DSHS Central Office
<b>Monday</b>		<u>By 1pm*</u> : Submit influenza or ILI activity reports for previous week to L/RHD	<u>By 3pm*</u> : Submit initial influenza activity report to RHD	<u>By COB</u> : Submit preliminary influenza activity report to DSHS EAIDU	
<b>Tuesday</b>	<u>By Noon</u> : Enter ILI report for previous week into ILINet				
<b>Wednesday</b>			<u>By COB*</u> : Submit final influenza report to RHD		
<b>Thursday</b>				<u>By noon</u> : Submit final influenza activity report to DSHS EAIDU	
<b>Friday</b>					<u>By COB</u> : Post State report on DSHS website

\*Recommended submission deadline. Actual deadline is set by each local health department or DSHS region.

### Other Reporting Time Frames and Requirements

What	Required by law	Time frame	Mechanism for health departments to share reports with DSHS CO
Influenza-associated pediatric mortality  <i>See Section IVf</i>	Yes	Providers should report cases to the health department within 1 working day by phone or fax.	<ol style="list-style-type: none"> <li>1) Call RHD or DSHS EAIDU to give a preliminary summary when the case is first reported.</li> <li>2) Fax completed influenza-associated pediatric mortality investigation form to RHD. RHD will forward to EAIDU.</li> <li>3) Complete investigation in NBS.</li> </ol>
Novel influenza  <i>See Section IVg</i>	Yes	Providers should report suspected cases to the health department immediately. Laboratories with subtyping capabilities should forward unsubtypeable influenza isolates to the DSHS laboratory as soon as possible.	<ol style="list-style-type: none"> <li>1) Fax completed general influenza investigation form along with supplemental sections on travel history, animal exposures and contacts to RHD. RHD will forward to EAIDU.</li> </ol>
Influenza or ILI outbreaks  <i>See Sections IVi and VII</i>	Yes	Providers should report suspected outbreaks to the health department immediately.	<ol style="list-style-type: none"> <li>1) Call RHD or DSHS EAIDU to give a preliminary summary when the outbreak is first reported.</li> <li>2) Fax or email the respiratory outbreak summary report or a written summary of the outbreak investigation to RHD. RHD will forward to EAIDU.</li> </ol>

**Surveillance Roles: Local/Regional/State**

<b>Level</b>	<b>Person</b>	<b>Responsibility</b>
Local Health Department	Local influenza surveillance coordinator	<ul style="list-style-type: none"> <li>• Recruit and maintain influenza surveillance reporters</li> <li>• Collect influenza activity information from local surveillance partners</li> <li>• Summarize information</li> <li>• Share influenza reporting information with the Regional Influenza Surveillance Coordinator and local surveillance partners</li> </ul>
Regional Health Department	Regional influenza surveillance coordinator	<ul style="list-style-type: none"> <li>• Recruit and maintain influenza surveillance reporters</li> <li>• Collect influenza activity information from local health departments and regional surveillance partners</li> <li>• Consolidate and summarize local influenza activity reports</li> <li>• Review ILINet and NREVSS data for the Region</li> <li>• Share influenza reporting information with the State Influenza Surveillance Coordinator and regional surveillance partners</li> <li>• Provide guidance on influenza surveillance to local health departments</li> </ul>
DSHS EAIDU Central Office	EAIDU influenza surveillance coordinator	<ul style="list-style-type: none"> <li>• Consolidate and summarize regional influenza activity reports, CDC influenza testing results and other laboratory and agency specific data</li> <li>• Share influenza reporting information on the DSHS website</li> <li>• Facilitate shipping of influenza testing supplies (VTM, swabs and shipping materials)</li> <li>• Provide guidance to regional and local health departments on influenza surveillance and reporting</li> <li>• Coordinate ILINet surveillance and review ILINet data for the state</li> <li>• Lead recruitment efforts for ILINet</li> <li>• Provide guidance to regional and local health departments on respiratory disease outbreak investigations</li> <li>• Provide guidance to regional and local health departments on influenza surveillance and reporting</li> </ul>

<https://www.dshs.texas.gov/influenza-flu-provider-information/influenza-flu-surveillance/texas-influenza-surveillance-handbook>, access 7/15/24

# Thank you!

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