

LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

NC REPORTABLE DISEASE/CONDITION	NC DISEASE CODE	INFECTIOUS AGENT (S)
HEMORRHAGIC FEVER VIRUS INFECTION	68	<i>Arenaviruses, Filoviruses, Bunyaviruses, Flaviviruses</i>
PREPARING FOR INVESTIGATION		
KNOW THE DISEASE/CONDITION	<ul style="list-style-type: none"> • Read about Hemorrhagic Fever Virus Infection in the CD Manual. • See the case definition for Hemorrhagic Fever Virus Infection in the CD Manual. • Study APHA <i>Control of Communicable Diseases Manual</i>, 19th ed., pp 334 - 337 for Lassa Fever, pp 204 - 207 for Ebola and Marburg or pp 59 - 61 for Crimean-Congo Fever. • Print and review reporting forms: <p style="margin-left: 20px;"><i>Part 1: Confidential Disease Report (DHHS 2124)</i> <i>Part 2: Hemorrhagic Fever Virus Infection (DHHS/EPI #68)</i></p> 	
BIOTERRORISM POTENTIAL CATEGORY A	<p><i>Arenaviruses, filoviruses, bunyaviruses and flaviviruses are potential bioterrorism agents. Notify local law enforcement and state public health officials immediately if bioterrorism is suspected.</i></p>	
CONDUCTING INVESTIGATION		
COLLECT CLINICAL INFORMATION	<ul style="list-style-type: none"> • These diseases are not endemic within the United States. For a clinician to suspect one of these diseases there must be a travel history to an area where the disease is endemic, exposure in a laboratory setting or a bioterrorism event. • Obtain medical record (admission note, progress note, other lab report(s), and discharge summary). • Obtain healthcare provider clinical notes from date(s) of service for this disease/condition. • Interview the patient to obtain travel history or other possible exposure source. • Look for evidence in the medical record that supports clinical findings described in the case definition. • If symptoms and exposure risk support a diagnosis of a viral hemorrhagic fever, contact state public health officials (919) 733-3419 and ensure control measures are implemented immediately. Do not wait for confirmation of diagnosis. 	

REVIEW LABORATORY INFORMATION	<ul style="list-style-type: none"> • Review laboratory report(s) specific to this disease. • Evaluate laboratory results to determine if requirements of the case definition are satisfied. • Contact the healthcare provider if further testing of the patient is indicated. The Communicable Disease Branch will assist in obtaining laboratory support from the CDC if the clinician has not already contacted the CDC.
APPLY THE CASE DEFINITION	<ul style="list-style-type: none"> • Use the case definition to determine if the clinical and laboratory findings meet the case definition criteria.
IMPLEMENTING CONTROL MEASURES	
ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE	<ul style="list-style-type: none"> • Review clinical records for potential source(s) of exposure. • If potential environmental or occupational source of exposure is not evident in clinical information, interview patient to obtain additional information including travel.
IMPLEMENT CONTROL MEASURES TO PREVENT DISEASE AND ADDITIONAL EXPOSURES	<ul style="list-style-type: none"> • Utilize the control measures contained in the <i>Control of Communicable Diseases Manual</i>, pp 334 - 337 under Lassa Fever. • The causative viruses for all of these diseases require special laboratory handling of serum or blood samples from suspected cases. Ensure hospital infection control and any laboratory personnel handling blood or serum samples have been notified. • Use the CDC website www.cdc.gov to teach at risk people about the disease.
REPORTING INVESTIGATION	
REPORT TO NC COMMUNICABLE DISEASE BRANCH (CD)	<ul style="list-style-type: none"> • Enter Part 1 and Part 2 Communicable Disease Reports into NC EDSS as a new event, or update the existing event if already entered. • Assign event to State Disease Registrar when case investigation complete. • Do an "Event_Print" in NC EDSS after assigning to the state. Keep for one year along with any additional notes. Maintain as a surveillance file, not a medical record.
CASE FINDING	<ul style="list-style-type: none"> • During the course of the investigation, interview other exposed individuals and quarantine as appropriate. • Refer symptomatic individuals to healthcare provider for evaluation.

SPECIAL CONSIDERATIONS	
STATE LABORATORY OF PUBLIC HEALTH (SLPH) TESTING	<ul style="list-style-type: none"> • Verify the laboratory test results of all cases by sending specimen(s) to the SLPH/CDC for reference testing. State public health officials will assist in obtaining laboratory support from the CDC if the clinician has not already contacted the CDC. • Inform SLPH by calling the BT Duty pager at (919) 310-4243 or cell phone at (919) 807-8600.
PUBLIC HEALTH PREPAREDNESS AND RESPONSE (PHPR)	<ul style="list-style-type: none"> • If bioterrorism event likely: <ul style="list-style-type: none"> ○ Inform local Preparedness Coordinator. ○ Call the PHPR 24/7 pager (877) 236-7477.
RISK COMMUNICATION	<ul style="list-style-type: none"> • Any case of this disease will pique interest among media, health professionals, government officials, and the public. • Outbreaks will need NC HAN alerts, EPI-X reports, MD alerts, and a press release. • In a bioterrorism event, pre-existing crisis communication plans will be enacted. • NC DHHS Public Information Office (919) 733-9190 is available to assist local health departments as needed.