



Piedmont Health District News

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*"Emphasizing
health promotion,
disease prevention,
and environmental
protection.*

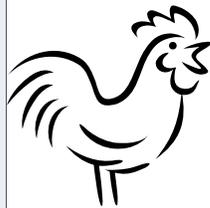
Medical Reserve Corps (MRC)

The Medical Reserve Corps is a group of volunteer healthcare professionals who are trained, credentialed and ready to respond to public health emergencies. MRC volunteers may be called upon to dispense medications and vaccinations, treat evacuees living in emergency shelters, or assist in a number of other ways. Last month letters were mailed to healthcare providers who previously indicated a willingness to assist during public health emergencies. So far we have 99 volunteers. If you would like to become an MRC volunteer please contact our Emergency Preparedness and Response Planner, Kent Emerson at Kent.Emerson@vdh.virginia.gov

Seasonal Influenza

Surveillance for influenza influenza-like illness (ILI) by sentinel physician providers has shown that ILI activity is now **regional** in Virginia. "Regional" activity is defined as increased ILI in >2 but less than half of the regions AND recent (within the past 3 weeks) lab confirmed influenza in the affected regions OR Institutional outbreaks (ILI or lab confirmed) in >2 and less than half of the regions AND recent lab confirmed influenza in the affected regions. Updated influenza reports and a color coded U.S. map illustrating ILI morbidity levels by state is provided on a weekly basis at the CDC web site at <http://www.cdc.gov/flu/weekly/fluactivity.htm>

Avian Influenza



The CDC recommends that "Testing for avian influenza A (H5N1) is indicated for hospitalized patients with radiographically confirmed pneumonia, acute respiratory distress syndrome (ARDS), or other severe respiratory illness for which an alternate diagnosis has not been established, AND history of travel within 10 days of symptom onset to a country with documented H5N1 avian influenza in poultry and/or humans (for a regularly updated listing of H5N1-affected countries, see <http://www.who.int/en/> or http://www.oie.int/eng/en_index.htm. Testing for avian influenza A (H5N1) should be considered on a case-by-case basis in consultation with state and local health departments for hospitalized or ambulatory patients with: documented temperature of >38°C (>100.4°F), AND one or more of the following: cough, sore throat, shortness of breath, AND history of contact with poultry (e.g., visited a poultry farm, a household raising poultry, or a bird market) or a known or suspected human case of influenza A (H5N1) in an H5N1- affected country within 10 days of symptom onset."

See <http://www.cdc.gov/flu/avian/professional/han020405.htm>

District Health Director:
Kay A. Rankin, MD, MPH
Phone: 434-392-3984 x131
Fax: 434-392-1038
e-mail:
kay.rankin@vdh.virginia.gov