COUNTY OF LOS ANGELES
Public Health

JONATHAN E. FIELDING, M.D., M.P.H.
Director and Health Officer

JONATHAN E. FREEDMAN
Chief Deputy Director

Acute Communicable Disease Control
LAURENE MASCOLA, M.D., M.P.H., Chief
313 North Figueroa Street, Room 212
Los Angeles, California 90012
TEL (213) 240-7941 • FAX (213) 482-4856

www.publichealth.lacounty.gov

July 22, 2011

Dear Physician and Laboratory Director:

The recent detection of dead birds and mosquitoes positive for West Nile virus (WNV) in Los Angeles County (LAC) marks the return of WNV season for 2011. Ten dead birds and nine mosquito pools have been detected in multiple localities including the city of Cerritos and areas in the San Gabriel Valley and San Fernando Valley. The LAC Department of Public Health (DPH) is continuing to monitor WNV activity and welcomes your participation in the reporting of human WNV infections. Last year, only four WNV cases were reported to the LAC DPH, a decrease of 84% from 25 cases in 2009. However, WNV surveillance has recorded up to 309 human infections in a single year in LAC since WNV was first identified in the County in 2003. It is difficult to predict the number of infections that may occur each season but reporting infections helps guide DPH and the LAC mosquito abatement districts to prevent further cases by targeting mosquito abatement services and health education.

The Acute Communicable Disease Control Program (ACDC) recommends that physicians order WNV screening tests for all patients with aseptic meningitis, encephalitis, or acute flaccid paralysis, as well as those who are experiencing a nonspecific illness compatible with WNV fever (an acute infection characterized by headache, fever, muscle pain, and/or rash lasting three days or longer) during the WNV season – late spring through the first week of November in California. WNV fever, WNV neuroinvasive disease (meningitis, encephalitis, and acute flaccid paralysis), and asymptomatic WNV positive blood donors are reportable by law to the DPH.

California and DPH regulations require physicians and laboratories to report all positive laboratory findings of WNV (and any other arbovirus infection) to the patient's local public health department within one working day. We remind clinicians and infection control professionals that all cases of acute encephalitis and meningitis (including those pending definitive diagnosis or suspected to be of viral, bacterial, fungal, or parasitic etiologies) remain reportable under the current California Code of Regulations section 2500 within one working day. A standard Confidential Morbidity Report (CMR) can be used to file a report; the CMR may be faxed to the DPH Morbidity Unit at (888) 397-3778. You may also report cases by telephone during normal business hours from 8:00 a.m. to 5:00 p.m. to (888) 397-3993.

Specimens positive for acute WNV infection in commercial labs generally do not require confirmation by the LAC Public Health Laboratory (PHL) to meet the WNV case definition. Excellent correlation has been shown between tests performed at most commercial labs and subsequent confirmation in PHL at the county and state.

In 2011, the LAC PHL will no longer be testing cerebrospinal fluid (CSF) for routine diagnosis of neurovinvasive WNV infection. The LAC PHL remains available for initial screening tests and confirmation of ambiguous results on serum specimens at no charge to the submitter. Enclosed is a standard laboratory submittal form that must be completed with physician and patient contact information and accompany the specimen(s). The PHL will accept serum specimens on outpatients with possible WNV fever diagnosed by a medical provider. Serum specimens should be submitted for WNV testing for patients hospitalized or evaluated in an emergency department or other health care setting for aseptic meningitis, encephalitis, or acute flaccid paralysis syndrome (atypical Guillain-Barré syndrome). Prior approval from ACDC physicians is not required before testing clinically compatible WNV fever or neuroinvasive disease cases. WNV testing can be requested for CSF under special circumstances (e.g. confirmation of ambiguous serum results) and will be forwarded to the Centers for Disease Control and Prevention for testing.

The DPH provides updated surveillance reports to the medical community throughout the summer and fall. For more information on WNV, please consult the LAC DPH web site at http://publichealth.lacounty.gov/acd/VectorWestNile.htm. Additionally, any medical provider can sign up for the Public Health Newsletter and be part of the list serve by signing up at: https://admin.publichealth.lacounty.gov/phcommon/public/listserv/index.cfm?ou=ph.

For medical consultation regarding WNV disease in humans, WNV prevention, surveillance activities, and test interpretation contact Rachel Civen, M.D., M.P.H. at (213) 240-7941 during normal business hours from 8:00 a.m. to 5:00 p.m. Critical after hours consultation is available by contacting the county operator and asking for the after hours doctor on call at (213) 974-1234. Public Health looks forward to working with clinicians and laboratories in our WNV surveillance efforts.

Sincerely,

Laurene Mascola, M.D., M.P.H., F.A.A.P.
Chief, Acute Communicable Disease Control Program
Los Angeles County Department of Public Health

LM:RC:sn
M:\Letters\2011\WNV-RC-005.doc

Attachment

c: Rachel Civen, M.D., M.P.H.

County of Los Angeles Public Health

Acute Communicable Disease Control
313 N. Figueroa St., Rm. 212, Los Angeles, CA 90012
213-240-7941 (phone) 213-482-4856 (facsimile)
www.lapublichealth.org/acd

WEST NILE VIRUS ACTIVE SURVEILLANCE LABORATORY SUBMITTAL FORM

INSTRUCTIONS FOR SENDING SPECIMENS

1. Required specimens

- ❑ **Acute Serum:** ≥ 2 cc serum
- ❑ **Cerebral Spinal Fluid (CSF):** 1-2 cc CSF Antibody testing for WNV is **not** available.

If West Nile virus (WNV) is highly suspected and acute serum is negative or inconclusive:

- ❑ **2nd Serum:** ≥ 2 cc serum collected 3-5 days after acute serum

2. Specimen handling

- ❑ **Refrigerate** serum specimens.
- ❑ Store cerebral spinal fluid (CSF) **frozen**.
- ❑ Each specimen should be labeled with **patient name**, **date of collection**, and **specimen type**.

3. Requested testing -- Check all that apply:

- ❑ Serum - WNV Antibody
- ❑ CSF - Enterovirus by PCR
- ❑ CSF - Herpes simplex virus (HSV) by PCR
- ❑ CSF - Viral Culture

Specimens should be sent on **cold pack** using an overnight courier to the following address:

Los Angeles County Public Health Laboratory, Serology Section
12750 Erickson Ave., Downey, CA 90242
(562) 658-1344

**** IMPORTANT: THE INFORMATION BELOW MUST BE COMPLETED AND SUBMITTED WITH SPECIMENS ****

Patient last name, first name:			**Patient Information:** Address_____
Age or DOB:	Sex (circle): M F	Onset Date:	City_____ Zip_____ County_____ Phone Number (_____)_____
Clinical findings: ❑ Encephalitis ❑ Meningitis ❑ Acute flaccid paralysis ❑ Febrile illness ❑ Other: _____			Other information (immunocompromised, travel history, history of flavivirus infection, etc.):
Other tests requested:			**This section for Laboratory use only.** **Date received and Accession Number**
1st	Specimen type and/or specimen source	Date Collected	**1st**
2nd	Specimen type and/or specimen source	Date Collected	**2nd**
3rd	Specimen type and/or specimen source	Date Collected	**3rd**

Submitting Physician_____ **Phone Number (_____)**_____

Submitting Facility_____ **Phone Number (_____)**_____

Questions concerning WNV? Call the Acute Communicable Disease Control Program at (213) 240-7941.
Los Angeles County Department of Public Health
Acute Communicable Disease Control Program