

Active Clinical Surveillance Guidance

When a facility has a possible or presumptive Legionella case, active surveillance must be implemented.

Timeline: Facilities are asked to perform enhanced surveillance for 2 months following either the date of facility notification, positive results, or after remediation is completed - whichever date is the latest. Any patient with signs and symptoms of pneumonia should be tested for Legionella.

Methods:

Active clinical surveillance is a period of enhanced surveillance during which healthcare facility staff proactively and systematically identify patients with healthcare-associated pneumonia (pneumonia with onset ≥ 48 hours after admission). During this time, they also ensure that Legionella specific testing is performed for each of those patients.

For hospitals, options for identifying patients with healthcare-associated pneumonia diagnoses could include:

- Daily review of chest radiographs and CT scans ordered to diagnose pneumonia
- Daily review of new pneumonia diagnoses occurring in patients in intensive care units
- Daily review of laboratory testing ordered to diagnose pneumonia (e.g., sputum Gram stain and culture).

Once cases of healthcare-associated pneumonia are identified, healthcare facility staff should perform Legionella testing. Legionella testing includes using both urinary antigen test and cultures of lower respiratory secretions in media that supports growth of Legionella.

Healthcare facilities should retain positive clinical specimens for the duration of the investigation.

Additional information on looking for additional healthcare-associated cases can be found [here](#)