



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

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To: All North Carolina Clinicians  
From: Emma Doran, MD, MPH, Medical Epidemiologist  
Subject: 2024-2025 Respiratory Virus Season: **Surveillance Update for NC Clinicians** (3 pages)  
Date: September 25, 2024

This memo provides information and guidance to NC clinicians regarding viral respiratory surveillance activities in North Carolina during the 2024-2025 respiratory season. As guidance may change during the season, up to date information will be available at [flu.nc.gov](https://flu.nc.gov).

### **Seasonal Influenza**

**In North Carolina, all influenza-associated deaths (adult and pediatric) are reportable to the Local Health Department. Specimens from patients who die from influenza should also be sent to the State Laboratory of Public Health (SLPH) for further characterization.** An influenza-associated death is defined for surveillance purposes as a death resulting from a clinically compatible illness that was confirmed to be influenza (any strain) by an appropriate laboratory or rapid diagnostic test. There should be no period of complete recovery between the illness and death. A death should *not* be reported if:

- 1) There is no laboratory or rapid test confirmation of influenza virus infection
- 2) The influenza illness is followed by full recovery to baseline health status prior to death, or
- 3) After review and consultation, there is an alternative agreed upon cause of death.

Please reach out to your [Local Health Department](#) or the Communicable Disease Branch epidemiologist on-call available 24/7 at (919) 733-3419 for questions about reporting influenza-associated deaths.

### **Human Novel or Variant Influenza**

In addition to influenza deaths, **human novel or variant influenza virus cases are reportable in North Carolina.** NC DPH requests your assistance with enhanced influenza surveillance and testing of individuals presenting with compatible illness and relevant exposure including contact with livestock, poultry, sick or dead wild animals, or raw milk or dairy products within the 10 days before symptom onset. Please follow the algorithm on page 3 for detailed considerations when assessing influenza-like illness in patients. Additional information is available on the [NC DHHS Avian Flu Website](#) including the [Provider Memo page](#).

### **Surveillance and Tracking**

North Carolina Division of Public Health (NC DPH) conducts surveillance for influenza, RSV, COVID-19 and other respiratory viruses using several systems. Surveillance is conducted for all visits to emergency departments across the state for influenza-like, RSV-like, and COVID-like illnesses. Information on

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LOCATION: 225 North McDowell St., Raleigh, NC 27603  
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weekly laboratory data is also gathered from the State Laboratory of Public Health and from public health epidemiologists (PHEs) at eight of the state's largest healthcare systems. More detailed data is available on the [NC Respiratory Virus Surveillance Dashboard](#).

NC DPH conducts surveillance and laboratory testing of outpatients seen by clinicians through participation in the Influenza-Like Illness Network (ILINet). Thirty practices are participating in ILINet for the 2024-2025 season so far. [Please consider joining ILINet if you have not done so.](#)

NC DPH also conducts wastewater monitoring for COVID-19 and is adding influenza and RSV detection to the state wastewater monitoring program. The [NC Wastewater Monitoring Dashboard](#) displays a detailed summary of these metrics.

The testing and surveillance strategies used by NC DPH are consistent with recommendations from the CDC and make use of the strong viral respiratory surveillance systems currently in place in North Carolina. Additional CDC guidance and information on respiratory illnesses is available [here](#).

Additionally, we ask you to please report **to your local health department all viral respiratory outbreaks**, particularly among young children in childcare and educational settings, and residents of long-term care facilities or other congregate living facilities. **We strongly recommend sending specimens collected from patients in influenza outbreaks to the State Laboratory of Public Health (SLPH) for further characterization.**

A weekly summary of NC respiratory surveillance data is available on the [Respiratory Virus Surveillance Dashboard](#). Clinicians should contact their [Local Health Departments](#) or the Communicable Disease Branch epidemiologist on-call available 24/7 at (919) 733-3419 for questions about viral respiratory infections.

cc: Dr. Erica Wilson, Medical Director, Medical Consultation Unit  
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### Testing Algorithm

