

LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

NC REPORTABLE DISEASE/CONDITION		INFECTIOUS AGENT (S)
LEGIONELLOSIS		<i>Legionella pneumophila</i>
PREPARING FOR INVESTIGATION		
KNOW THE DISEASE/CONDITION	<ul style="list-style-type: none"> • Read about Legionellosis in the CD Manual. • See the case definition for Legionellosis in the CD Manual. • Study APHA <i>Control of Communicable Diseases Manual</i>, 20th ed., pp 334–337. • Print and review reporting forms: <p style="margin-left: 20px;"><i>Part 1: Confidential Disease Report(DHHS 2124)</i> <i>Part 2: Legionellosis (DHHS/EPI #18)</i></p>	
CONDUCTING INVESTIGATION		
COLLECT CLINICAL INFORMATION	<ul style="list-style-type: none"> • If patient hospitalized for this disease, obtain medical record (admission note, progress note, lab report(s), and discharge summary). • Obtain healthcare provider clinical notes from date(s) of service for this disease/condition. • Look for evidence in the medical record that supports clinical findings described in the case definition. • Look for evidence of immunosuppressive conditions or medications which would suppress the immune system; other predisposing conditions such as diabetes, malignancy, liver disease, kidney disease and especially chronic lung disease. Smokers should be considered as having chronic lung disease. • Identify the date of illness onset, which may differ from the date of positive laboratory result 	
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. 	
IMPLEMENTING CONTROL MEASURES		
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. 	

ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE	<ul style="list-style-type: none"> • Review clinical documentation and interview patient or other knowledgeable person regarding potential exposures, including travel, healthcare, and other potential sources, during the 10 days before illness onset: <ul style="list-style-type: none"> ○ sources of aerosolized water (cooling towers, whirlpools, spas, pools, fountains, outdoor misters, humidifiers, nebulizers, C-PAP machines or other respiratory therapy devices) ○ contact to moist soils (including peat moss and potting soils) ○ recent outpatient medical care (e.g., physician offices, dental offices, dialysis centers, ambulatory surgery centers, etc) recent inpatient medical care (e.g., hospitalizations, long term care facilities)
IMPLEMENT CONTROL MEASURES TO PREVENT DISEASE AND ADDITIONAL EXPOSURES	<ul style="list-style-type: none"> • Use the CDC website www.cdc.gov to teach at risk people about the disease. • CD nurses should work with their environmental health specialist and other public health partners to evaluate the environmental risk, identify contaminated aerosolized water sources and assure disinfection.
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.
CASE FINDING	<ul style="list-style-type: none"> • During the course of the investigation, interview other exposed individuals for symptoms of illness. • Refer symptomatic individuals to healthcare provider for evaluation.
SPECIAL CONSIDERATIONS	
STATE LABORATORY OF PUBLIC HEALTH (SLPH) TESTING	<ul style="list-style-type: none"> • If microbiologic testing has not yet been performed and a respiratory specimen (e.g., sputum, lung tissue, pleural fluid) is available, consult with the Communicable Diseases Branch (919-733-3419) to determine if the specimen should be sent to the SLPH for microbiologic testing. The specimen submittal form can be found at: http://slph.state.nc.us/Forms/DHHS-4121-SpecAtypBact-v2-withWorksheet.pdf •
RISK COMMUNICATION	<ul style="list-style-type: none"> • Consider using risk communication tools conservatively if this is a low profile case. • Outbreaks might require NC HAN alerts, EPI-X reports, MD alerts, and/or a press release. Consult with the Communicable Diseases Branch (919-733-

	<p>3419) for guidance and assistance.</p> <ul style="list-style-type: none">• NC DHHS Public Information Office (919-733-9190) is available to assist local health departments as needed.
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