

LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

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NC REPORTABLE DISEASE/CONDITION	INFECTIOUS AGENT (S)
STAPHYLOCOCCUS AUREUS (VISA) OR (VRSA)	<i>Staphylococcus aureus</i> (Reduced or Resistant Susceptibility to Vancomycin)
PREPARING FOR INVESTIGATION	
KNOW THE DISEASE/CONDITION	<ul style="list-style-type: none"> • Read about <i>S. aureus</i>, reduced susceptibility to Vancomycin in the CD Manual. • See the case definition for <i>S. aureus</i>, reduced susceptibility to Vancomycin in the CD Manual. • VRSA (Vancomycin MIC \geq16 mg/ml) is a public health emergency and the CD Branch on call epidemiologist should be notified immediately. • NOTE: This is not the same as Methicillin Resistant <i>S. aureus</i> (MRSA). MRSA is not a reportable disease. • Study the <u>Red Book, 2009 Report of the Committee on Infectious Diseases</u>. 28th ed., pages 601 – 615. • Refer to APHA <i>Control of Communicable Diseases Manual</i>, 19th ed., pp 568 - 575. • Refer to the following guidelines from CDC “Investigation and Control of Vancomycin-Intermediate and -Resistant <i>Staphylococcus aureus</i> (VISA/VRSA): A Guide for Health Departments and Infection Control Personnel” CDC, Division of Healthcare Quality Promotion, September 2006; 1-19. Available at: http://www.cdc.gov/hai/pdfs/visa_vrsa/visa_vrsa_guide.pdf • Print and review reporting forms: <p style="margin-left: 20px;"><i>Part 1: Confidential Disease Report (DHHS 2124)</i> <i>Part 2: S. aureus, with reduced susceptibility to Vancomycin (DHHS/EPI #74)</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 specifically for documentation of Vancomycin therapy within the last year.

	<ul style="list-style-type: none"> Look for evidence in the medical record that supports clinical findings described in the case definition.
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. Ensure a clinical specimen is sent to the SLPH for confirmatory testing. Notify the SLPH of impending specimen by calling (919) 733-7367. Specify the need to test for <u>Vancomycin Intermediate Staph aureus /Vancomycin Resistant Staph aureus (VISA/VRSA)</u>. Use the following link to obtain more information: http://slph.state.nc.us/Microbiology/default.asp
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.
IMPLEMENTING CONTROL MEASURES	
ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE	<ul style="list-style-type: none"> Review clinical records for potential source(s) of exposure. If potential source of exposure is not evident in clinical information, interview patient to obtain additional information. Ask specifically about healthcare exposure within the last year (hospitalization, dialysis, and/or long term care).
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. Refer to the following guidelines from CDC "Investigation and Control of Vancomycin-Intermediate and -Resistant Staphylococcus aureus (VISA/VRSA): A Guide for Health Departments and Infection Control Personnel" CDC, Division of Healthcare Quality Promotion, September 2006: www.cdc.gov/ncidod/dhqp/pdf/ar/visa_vrsa_guide.pdf
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. Be sure to include specific Vancomycin MIC when reporting case.

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. • For contacts with extensive interaction with the patient or cases in institutional settings, contact the CD Branch to discuss additional guidance if indicated.
SPECIAL CONSIDERATIONS	
PERSONAL PROTECTIVE MEASURES	<ul style="list-style-type: none"> • Contact precautions are necessary for any contact with suspects or cases of <i>S. aureus</i> VISA or VRSA.
RISK COMMUNICATION	<ul style="list-style-type: none"> • Consider using risk communication tools conservatively if this is a low profile case. • Outbreaks will need NC HAN alerts, EPI-X reports, MD alerts, and probably a press release. • NC DHHS Public Information Office (919) 733-9190 is available to assist local health departments as needed.