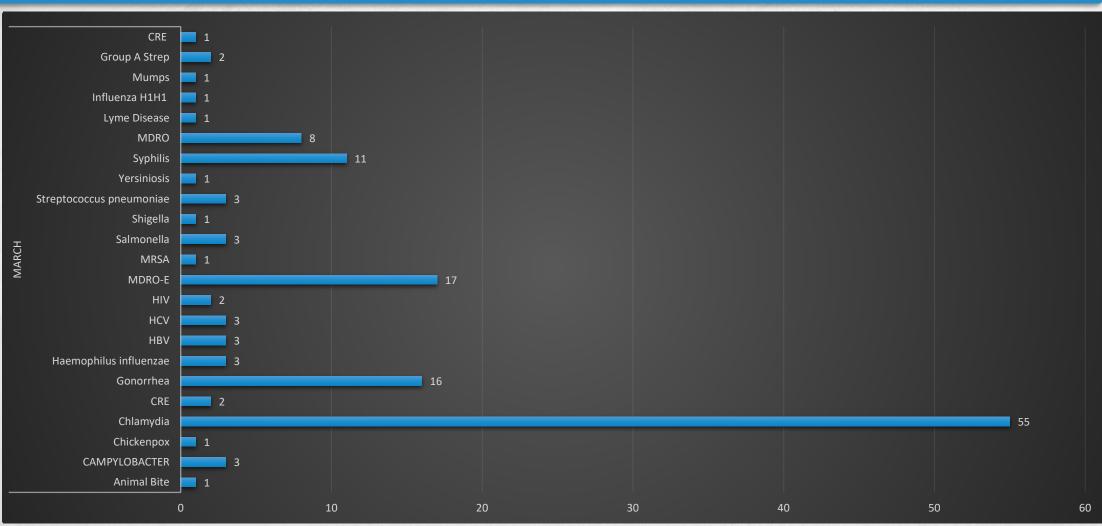
Epi Report For The Board March 1-31, 2024

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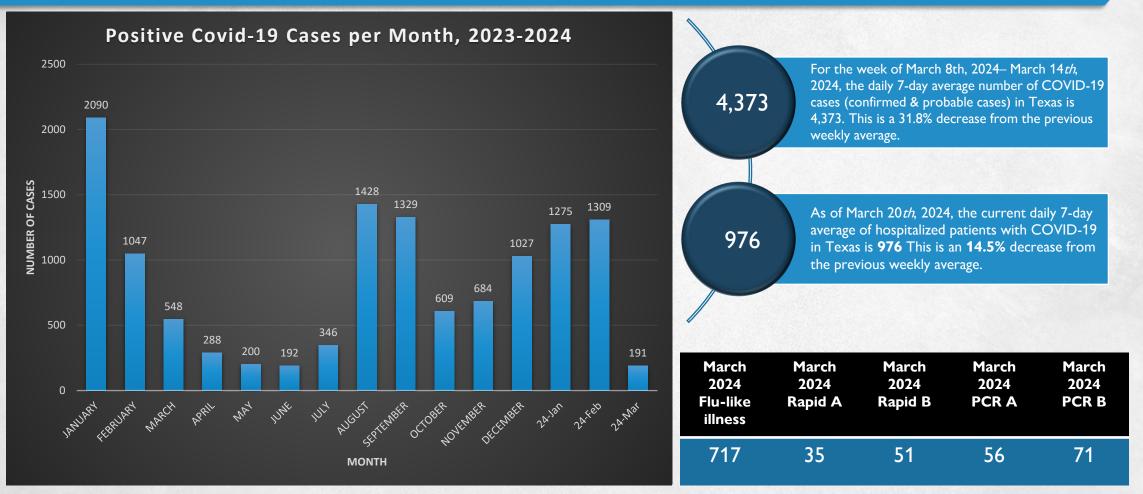


Cases and Conditions (140 Counts): March 1-31st, 2024



BELL COUNTY PUBLIC HEALTH

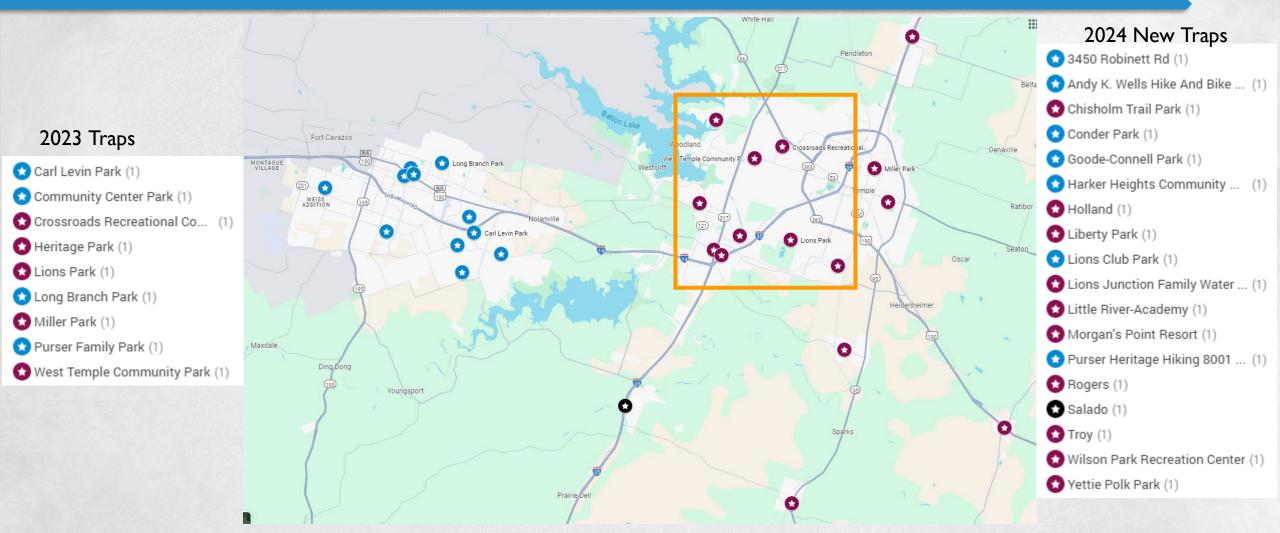
*Covid-19, Influenza, & RSV: March 1-31st, 2024



*3/11/24: DSHS notified laboratories they are no longer required to report covid lab results. All reported labs after this date are strictly voluntary



Integrated Vector Management: Potential 2024 Traps





https://www.google.com/maps/d/edit?mid=1G6cbtnVn-EO5M-kHLLQTJh-S81A5IRI&usp=sharing

March 1-31st Outbreaks and Concerns

Avian Influenza in Goats

3/20: Believed to be the first time it has been found in livestock. Found after poultry on the same farm tested positive. Both animals shared same space and water source. All animals under quarantine (Stevens County, Minnesota)

Avian Influenza in Cows

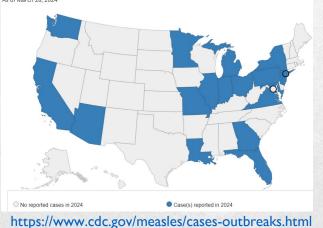
3/25: Dairy cattle in Texas and Kansas test positive for bird flu. Both farms had dead wild birds on the property. Commercial milk supply is considered low risk and safe to consume

Burkholderia multivorans Healthcare Outbreak

3/25: B. Multivorans was isolated from multiple ice machines in two hospitals across two states

CDC HAN: Measles

Increase in global and domestic measles cases and outbreaks – ensure children in the US and travelling internationally 6 months and older are current on MMR vaccination Jurisdictions Reporting Cases in 2024





LTCF Harker Heights

2/6: 2 residents positive

2/7: 1 resident positive, mass testing then 10 positive

2/14: 47 positive

2/16: BCPH received notification from CDC/DSHS that 29/132 residents were positive

- DoN & Administrator are new, did not answer or return calls, and were not aware that they had reporting requirements. Apologies but no specific reason for not returning calls
- Found improper mask wearing by staff, lack of hand hygiene at stations
- Advised to "hold new admission" until outbreak is contained
- Provided them with outbreak reporting form and advice on how to use it

2/19: received outbreak reporting forms for each day

2/20: DSHS Infection Control to set up infection control practices review for the morning of 2/22

2/29: BCPH advised staying closed to new admissions until there were 3 or fewer active cases in the facility

3/5: Met the 3 or fewer cases suggested for new admissions

4/3: Visit to facility planned

				date				
12/22/2024	3/5/2024	56	0	0	0	2	35	0
12/22/2024	3/5/2024	23	0	0	0	0	136	0

March 11, 2024 Updated DSHS Respiratory Illness Guidance

- Texas laboratories and health care providers are no longer required to <u>report</u> positive or negative COVID-19 test results. They may continue reporting electronically. Expect a sharp dip in cases due to this change
- DSHS is working out details on surveillance and data reporting, what defines an outbreak, how schools can report cases/outbreaks, and potential messaging for healthcare providers
- Most individual cases of COVID-19 are not reportable in Texas. Exceptions are outbreaks or unusual group expression of the disease.
 - Priority 1: Reported COVID-19-associated outbreak(s) in any population or facility (e.g. nursing homes, assisted-living facilities, daycares, correctional facilities, schools, camps, mass gatherings)
 - Priority 2: unusual group expression of COVID-19 that may be of public health concern as per Texas Administrative Code Rule 97.3 should be reported as soon as possible
- DSHS has updated the Texas school exclusion <u>criteria</u> to align the requirement for COVID-19 with those for other respiratory viruses like flu. Students now only need to be excluded from school until they have been fever free for 24 hours without the use of fever-reducing medication.

C	 Breathing in air when close to an infected person who is exhaling small droplets and particles that contain the virus Having these small droplets and particles that contain the virus land on the eyes, nose, or mouth, especially through splashes and sprays like a cough or sneeze Touching eyes, nose, or mouth with hands that have the virus on them Persons infected with COVID- 19 may still transmit the virus before symptoms develop, or if they are asymptomatic 	Up to 14 days, with a median time of 3- 5 days from exposure to symptom onset	 Symptoms can vary from asymptomatic to critical disease Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea 	Yes	Fever-free ⁶	No	 Vaccine available Teach effective handwashing, good respiratory hygiene, and cough etiquette⁴ Disinfect frequently touched surfaces Take steps for cleaner air Avoid close contact with people who are sick
Influenza (Flu)	Breathing in respiratory droplets containing the pathogen after an infected person exhales, sneezes, or coughs Oirect contact with respiratory secretions from an infected person Touching a contaminated surface then touching mouth, nose, or eyes	Range: 1-4 days	 Rapid onset of fever, headache, sore throat, dry cough, chills, lack of energy and muscle aches Children can also have nausea, vomiting, or diarrhea 	Yes	Fever-free ⁶	No, except for pediatric influenza deaths, novel influenza, or outbreaks ⁹	 Vaccine available and recommended⁹ annually for all persons aged six months and older Teach effective handwashing, good respiratory hygiene, and cough etiquette⁹
Respiratory Syncytial Virus (RSV)	- Touching a contaminated surface then touching mouth, nose, or eyes	Range: 2- 8 days Commonly: 4- 6 days	 Mostly seen in children younger than 2 years of age Cold-like signs or symptoms, irritability, and poor feeding May present with wheezing and episodes of turning blue when coughing 	No, unless fever	Fever-free ⁶	No	- Treatment is recommended - Teach effective handwashing, good respiratory hygiene, and cough etiquette*

https://www.dshs.texas.gov/sites/default/files/IDCU/health/schools_childcare/Communicable-Disease-Chart-03042024.pdf

March 2024 Updated CDC Respiratory Illness Guidance – Community

https://www.cdc.gov/respiratory-viruses/prevention/precautions-when-sick.html

You can go back to your normal activities when, for at least 24 hours, both are true:

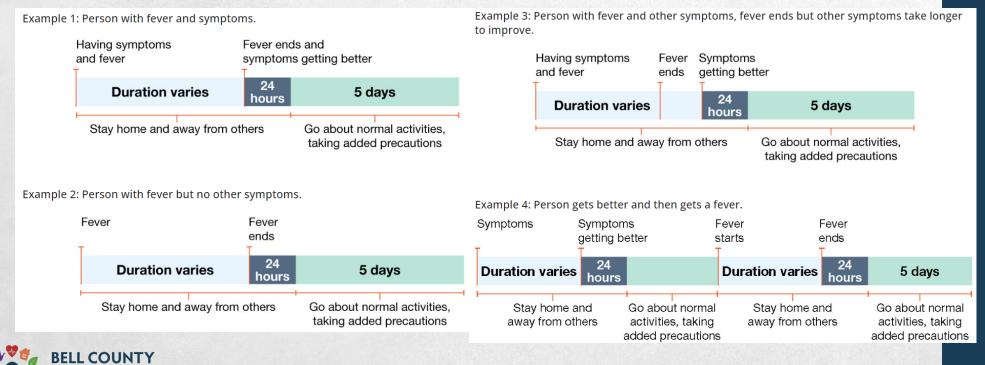
• Your symptoms are getting better overall, and

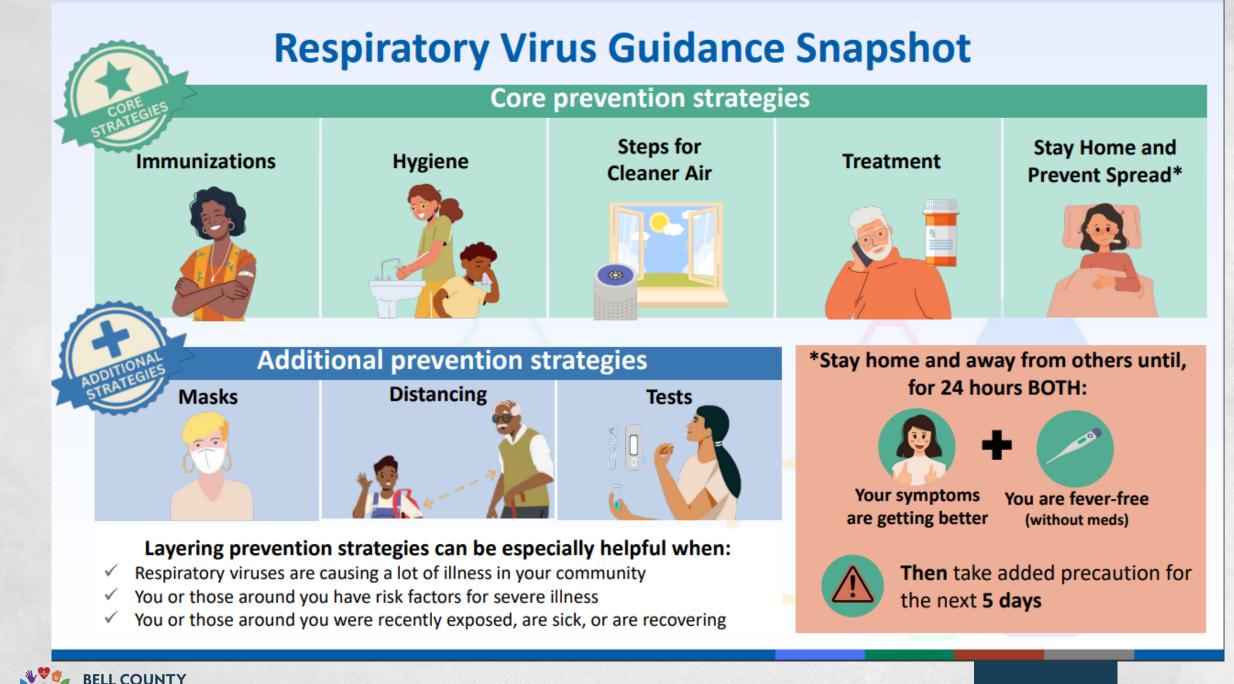
IBLIC HEALTH

You have not had a fever (and are not using fever-reducing medication).

When you go back to your normal activities, take added precaution over the next 5 days, such as taking additional <u>steps for cleaner</u> air, <u>hygiene, masks</u>, <u>physical distancing</u>, and/or <u>testing when you</u> will be around other people indoors.

- Keep in mind that you may still be able to spread the virus that made you sick, even if you are feeling better. You are likely to be less contagious at this time, depending on factors like how long you were sick or how sick you were.
- If you develop a fever or you start to feel worse after you have gone back to normal activities, stay home and away from others again until, for at least 24 hours, both are true: your symptoms are improving overall, and you have not had a fever (and are not using fever-reducing medication). Then take added precaution for the next 5 days.





BLIC HEALTH https://www.cdc.gov/respiratory-viruses/downloads/RVG-Summary-Graphic-508.pdf