Preliminary cases of reportable diseases/conditions reported as of October 1, 2019.

Disease/condition counts for 2015-2018 are final. Disease/condition counts for 2019 are preliminary and will change. For official case counts, please call the Leon County Health Department Epidemiology

Program at (850) 404-6299.

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		Cumi	uiativė ((טוד							Monthly					
Disease Category	2015	2016	2017	2018	2019	JAN	FEB	MAR	APR	MAY	JUN JUL	AUG	SEP	ОСТ	NOV	DEC
A. Vaccine-Preventable Diseases																
Mumps	0	1	1	4	1	C) () 1	0	0	0 (0 0	0			
Pertussis	3	4	3	0	7	C) 2	2 3	0	0	0 -	1 0	1			
Tetanus	0	0	0	0	2	1			0	0	0 () 1	0			
Varicella (Chickenpox)	5	2	2	4	1	1	(0	0	0	0 (0 0	0			
B. CNS Diseases and Bacteremias																
Creutzfeldt-Jakob Disease (CJD)	1	0	0	1	0	0) (0	0	0	0 (0 0	0			
Haemophilus influenzae Invasive Disease	1	8	2	4	6	1	1	1 2	2	0	0 (0	0			
In Children 5 Years or Younger	1	1	2	0	0	0) (0	0	0	0 (0 0	0			
Meningitis, Bacterial or Mycotic	6	5		0		C						0 1				
Meningococcal Disease	0		2	0		C						0 0				
Staphylococcus aureus Infection (VISA, VRSA)	1			0								0 0			_	
Streptococcus pneumoniae Invasive Disease (Drug-Resistant, Drug-Susceptible)	12			13	20	_		_				2 2				
In Children 6 Years or Younger	- 6			1	1	C						0 0			_	
C. Enteric Infections												-, -				_
Campylobacteriosis*	40	31	49	38	40	3	11	1 1	3	8	2 4	1 4	4			
Cryptosporidiosis	39		29	33	13) 1	0			
Cyclosporiasis	0			2	24	_							_		_	
Giardiasis, Acute	12	_	27	10								_				
Salmonellosis**	99		65	76								9 4				
Shiga Toxin-Producing Escherichia coli (STEC) Infection****	6		5	8		_										
Shigellosis**	7			4								1 3				
Typhoid Fever (Salmonella serotype Typhi)	0	Ū		1	0	_		_	_) 0			$\overline{}$	
D. Viral Hepatitis		· U			U		'	<u> </u>		U	l ol o	<u> </u>	U			
Hepatitis A	2	. 0	0	1	3	0) (0	0	1	2 (0 0	0			
Hepatitis B, Acute	1			2	4	_) 1				
Hepatitis B, Chronic	54			65								5 3				
Hepatitis B, Surface Antigen in Pregnant Women	5			5		0						0				
Hepatitis C, Acute	0		3	2	2							0 0				
Hepatitis C, Chronic	153		230	206	_	10						18				
Hepatitis C, Perinatal	130		0	200	1 1	0						0 0				
E. Vectorborne, Zoonoses		<u>'I '</u>	, v		<u> </u>		'	<u> </u>		'	_ 0_ 0	<u> </u>	U			
Ehrlichiosis/Anaplasmosis	2	4	5	5	1	C) (0	1	0	0 0	0 0	0		_	
Herpes B Virus, Possible Exposure	0			0		0) 1				
Lyme Disease	2	_	3	3		_) 1	_			
Malaria	0		7	0								0 0			$\overline{}$	
Rabies, Animal	2		2	5						0		5 0			$\overline{}$	
Rabies, Possible Exposure	36			47	45										$\overline{}$	
Rocky Mountain Spotted Fever and Spotted Fever Rickettsiosis	2			47		_				_		0 0			$\overline{}$	-
West Nile Virus Disease†	0			3		_						0 0			$\overline{}$	-
West Nile Virus Disease† Zika Virus Disease and Infection (Congenital, Non-Congenital)	0		1	0		1 4						0 0				-
F. Others	1 0	<u>'</u>	<u>'</u>	U	_	_		, ,				, U				
Carbon Monoxide Poisoning	1	5	6	8	4) (0 0	0	0	0 0) 4	0			
Lead Poisoning***	1	_		33		_			_						$\overline{}$	
Lead Polsoning*** Legionellosis	3			33								0 0	_			-
Pesticide-Related Illness and Injury, Acute	0			0			_					0 0			$\overline{}$	-
	0	_		0	2							0 0	_			-
Scombroid Poisoning				1			1 1	0	0	0	U (0	0			
Tuberculosis	6			10				 .	<u> </u>	 .		\ -	_			—
Vibriosis (Excluding Cholera)**	547		4	7	5						0 (_
TOTAL	517	596	608	607	495	47	48	38	49	55	62 68	71	50	0	0	0

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Year-to-date county--level case counts with comparison periods was created in Merlin using the Incidence Report feature.

A similar table can be created and modified in ESSENCE-FL by Florida Department of Health staff using the Stat Table feature (https://www.essencefl.com/florida 5 1 19/serviet/StatTableServiet)

Please note the following:

The table includes preliminary confirmed, probable and suspect cases reported in Leon County residents (regardless of where infection was acquired) by date reported to the Bureau of Epidemiology as captured in the reportable disease surveillance application (Merlin). Merlin case counts for 2019 will be finalized in April 2020. 2019 preliminary case counts are current as of the date above, but may change. A percentage of cases will be determined not to be cases after additional review and this percentage varies by disease.

Counts presented in this table may differ from counts presented in other tables or reports, depending on the criteria used.

Changes in case definitions can result in dramatic changes in case counts. Please see Florida Surveillance Case Definitions on the Bureau of Epidemiology for Information on case definition changes (http://www.floridahealth.gov/diseases-and-conditions/disease-reporting-and-management/disease-reporting-and-management/disease-reporting-and-surveillance/case-definition-archive.html).

^{*} From 2015 to 2016, the probable case classification for campylobacteriosis included non-culture tests for symptomatic people with no culture result available and no other enteric pathogen detected. Beginning in 2017, the probable case classification was revised to include non-culture tests for symptomatic people, independent of a culture result of another enteric pathogen.

^{**} Beginning in 2017, the probable case classification for salmonellosis, shigellosis, and vibriosis included non-culture tests, independent of the presence of symptoms

^{***} Beginning in 2017, lead poisoning incidence increased dramatically due to a change in case definition that lowered the blood lead level in the case definition from ≥10 to ≥5 µg/dL. In 2017, Florida lowered the blood lead level for lead poisoning from ≥10 to ≥5 µg/dL to align with current national guidelines based on the adverse health effects caused by blood lead levels <10 µg/dL in both children and adults.

^{****} Beginning in 2018, the probable case classification for Shiga toxin-producing E. coli (STEC) included non-culture tests for symptomatic people

 $^{^{\}dagger}$ Includes neuroinvasive and non-neuroinvasive