

# LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

NC REPORTABLE DISEASE/CONDITION	NC DISEASE CODE	INFECTIOUS AGENT (S)
<b>STAPHYLOCOCCUS AUREUS (VISA) OR (VRSA)</b>	<b>74</b>	<b><i>Staphylococcus aureus</i> (Reduced or Resistant Susceptibility to Vancomycin)</b>
<b>PREPARING FOR INVESTIGATION</b>		
<b>KNOW THE DISEASE/CONDITION</b>	<ul style="list-style-type: none"> <li>• Read about <i>S. aureus</i>, reduced susceptibility to Vancomycin in the CD Manual.</li> <li>• See the case definition for <i>S. aureus</i>, reduced susceptibility to Vancomycin in the CD Manual.</li> <li>• <b>VRSA (Vancomycin MIC <math>\geq</math>16 mg/ml) is a public health emergency and the CD Branch on call epidemiologist should be notified immediately.</b></li> <li>• <b>NOTE:</b> This is not the same as Methicillin Resistant <i>S. aureus</i> (MRSA). MRSA is not a reportable disease.</li> <li>• Study the <u>Red Book, 2009 Report of the Committee on Infectious Diseases</u>. 28<sup>th</sup> ed., pages 601 – 615.</li> <li>• Refer to APHA <i>Control of Communicable Diseases Manual</i>, 19<sup>th</sup> ed., pp 568 - 575.</li> <li>• 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: <a href="http://www.cdc.gov/hai/pdfs/visa_vrsa/visa_vrsa_guide.pdf">http://www.cdc.gov/hai/pdfs/visa_vrsa/visa_vrsa_guide.pdf</a></li> <li>• Print and review reporting forms: <ul style="list-style-type: none"> <li><i>Part 1: Confidential Disease Report (DHHS 2124)</i></li> <li><i>Part 2: S. aureus, with reduced susceptibility to Vancomycin (DHHS/EPI #74)</i></li> </ul> </li> </ul>	
<b>CONDUCTING INVESTIGATION</b>		
<b>COLLECT CLINICAL INFORMATION</b>	<ul style="list-style-type: none"> <li>• If patient hospitalized for this disease, obtain medical record (admission note, progress note, lab report(s), and discharge summary).</li> <li>• Obtain healthcare provider clinical notes from date(s) of service for this disease/condition.</li> <li>• Look specifically for documentation of Vancomycin therapy within the last year.</li> </ul>	

	<ul style="list-style-type: none"> <li>Look for evidence in the medical record that supports clinical findings described in the case definition.</li> </ul>
<b>REVIEW LABORATORY INFORMATION</b>	<ul style="list-style-type: none"> <li>Review laboratory report(s) specific to this disease.</li> <li>Evaluate laboratory results to determine if requirements of the case definition are satisfied.</li> <li>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: <a href="http://slph.state.nc.us/Microbiology/default.asp">http://slph.state.nc.us/Microbiology/default.asp</a></li> </ul>
<b>APPLY THE CASE DEFINITION</b>	<ul style="list-style-type: none"> <li>Use the case definition to determine if the clinical and laboratory findings meet the case definition criteria.</li> </ul>
<b>IMPLEMENTING CONTROL MEASURES</b>	
<b>ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE</b>	<ul style="list-style-type: none"> <li>Review clinical records for potential source(s) of exposure.</li> <li>If potential source of exposure is not evident in clinical information, interview patient to obtain additional information.</li> <li>Ask specifically about healthcare exposure within the last year (hospitalization, dialysis, and/or long term care).</li> </ul>
<b>IMPLEMENT CONTROL MEASURES TO PREVENT DISEASE AND ADDITIONAL EXPOSURES</b>	<ul style="list-style-type: none"> <li>Use the CDC website <a href="http://www.cdc.gov">www.cdc.gov</a> to teach at risk people about the disease.</li> <li>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: <a href="http://www.cdc.gov/ncidod/dhqp/pdf/ar/visa_vrsa_guide.pdf">www.cdc.gov/ncidod/dhqp/pdf/ar/visa_vrsa_guide.pdf</a></li> </ul>
<b>REPORTING INVESTIGATION</b>	
<b>REPORT TO NC COMMUNICABLE DISEASE BRANCH (CD)</b>	<ul style="list-style-type: none"> <li>Enter Part 1 and Part 2 Communicable Disease Reports into NC EDSS as a new event, or update the existing event if already entered.</li> <li>Assign event to State Disease Registrar when case investigation complete. <b>Be sure to include specific Vancomycin MIC when reporting case.</b></li> <li>Do an "Event_Print" in NC EDSS after assigning to the state. Keep for one year along with any additional notes. Maintain as a surveillance file, not a medical record.</li> </ul>

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