



North Carolina Department of Health and Human Services
Division of Public Health

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Penelope Slade-Sawyer
Division Director

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From: Zack Moore, MD, MPH
Medical Epidemiologist
North Carolina Division of Public Health

Re: Testing of residents for Legionnaires' disease (1 page)

This memo is intended to clarify public health recommendations for Legionnaires' disease testing among residents in facilities that are experiencing outbreaks or investigating healthcare-associated cases.

Legionella urinary antigen testing is recommended for the following groups of residents:

1. Anyone diagnosed as having had pneumonia within six months before onset of illness in the first case identified in your facility (i.e., retrospective surveillance).
2. Anyone diagnosed with pneumonia after onset of illness in the most recent case in your facility (i.e., prospective surveillance). The duration of prospective surveillance will depend on other findings from the investigation.

Legionella urinary antigen test is a diagnostic test, not a screening test. Testing is not recommended for residents who have not had clinical symptoms. Positive results in residents who have not had clinical symptoms could result in unnecessary and potentially harmful treatment in a population already at risk for multi-drug resistant organism infections and other complications of antibiotic therapy.

There is also no public health recommendation to repeat legionella urinary antigen testing in patients who have already tested positive. The urinary antigen is likely to remain positive for several months after the acute illness and is not a marker for response to antibiotic treatment.

Please note that this memo describes public health recommendations, which may differ from testing recommended for an individual patient by his or her health care provider.

www.ncdhhs.gov • <http://epi.publichealth.nc.gov/cd/>
Tel 919-733-7301 • Fax 919-733-1020

Location: 225 N. McDowell Street • Raleigh, NC 27603
Mailing Address: 1902 Mail Service Center • Raleigh, NC 27699-1902
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