

**NOVEMBER 2012 BULLETIN - PERTUSSIS**

**OUTBREAK TRENDS**

**Nationwide**

32,000 cases of pertussis were reported to CDC through October 15, 2012. 16 pertussis-related deaths have been reported during that same time period. The majority of deaths continue to occur among infants younger than 3 months of age.

**New York State-Through early September 2012:**

2,000 cases (compared to 928 cases in 2011) 163 cases were infants ≤ 1 year of age (compared to 110 cases in 2011) and 1,072 cases were 10 to 19 years.

**Oneida County**

2011 - 5 confirmed cases year-end total  
2012 - 33 confirmed cases YTD October 25



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[www.cdc.gov/pertussis](http://www.cdc.gov/pertussis)



**COMMUNICABILITY**

First day of communicability=date of catarrhal symptom onset  
Last day of communicability=21 days after symptom onset, or 5 days after initiation of appropriate antibiotic therapy  
**Exclude from work/school if cough onset < 21 days and/or < 5 days of antibiotics.**



**QUESTIONS?**  
Call Oneida County Health Dept at 798-5290

**TESTING for PERTUSSIS**

PCR and culture are the only recommended diagnostic testing methods for pertussis in NYS. Use *Dacron*, not cotton swab.  
<http://www.cdc.gov/pertussis/clinical/diagnostic-testing/specimen-collection.html>  
Optimal time for testing:  
PCR should be tested from NP specimens taken 0-3 weeks following cough onset but may provide accurate results for up to 4 weeks of cough in infants or unvaccinated persons.

**TREATMENT: Go to New York Pertussis Outbreak Control Guidelines July 2012**

[http://www.health.ny.gov/prevention/immunization/providers/docs/pertussis\\_outbreak\\_control\\_guidelines.pdf](http://www.health.ny.gov/prevention/immunization/providers/docs/pertussis_outbreak_control_guidelines.pdf)

**INFECTION PREVENTION in AMBULATORY CARE**

Implement Respiratory Etiquette

**Ambulatory Care:** For patients with respiratory symptoms:

- Have language appropriate signage at point of entry
- Implement telephone triage
- Upon entry, patients are to be instructed to don a mask, place patient in exam room ASAP with closed door
- Provide tissues, waste disposal and hand washing capability in waiting room

**Healthcare Personnel Responsibilities:**

- Hand hygiene after contact with respiratory secretions and between patient contact
- Utilize Standard and Droplet Precautions when examining, testing and caring for patients with signs and symptoms of a respiratory infection
- Get Tdap and annual influenza vaccinations
- Instruct patients and visitors to cover coughs and sneezes



**PERTUSSIS VACCINATION**

**To provide optimum pertussis vaccine coverage:**

- Children ages 2 months to 6 years should receive all age appropriate doses of **DTaP** vaccine
- **Tdap** for children aged 11-12 years and can be given to children as young as 7 and is required for entry into grades 6 through 10

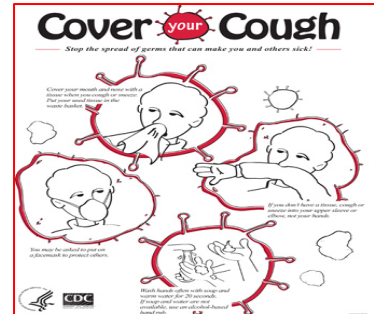
<http://www.cdc.gov/mmwr/PDF/rr/rr4607.pdf>

- Single dose of **Tdap** for healthcare personnel who have not previously received **Tdap** as an adult and who have direct patient care. Priority should be given to those with direct contact with babies < 12 months.

**New Law: PHL Sect. 2805**

Requires all general hospitals that have newborn nurseries or provide obstetric care to offer pertussis vaccination to parents and anticipated caregivers of all newborns following their birth. **Effective 1/14/2013**

*If post-exposure prophylaxis is indicated, administer it regardless of the contact's previous history of pertussis vaccination.*



**YOU CAN GET THIS SIGN**  
<http://www.cdc.gov/flu/protect/covercough.htm>