

The Pump Handle



"I had an interview with the Board of Guardians of St. James's parish, on the evening of Thursday, 7th September, and represented the above circumstances to them. In consequence of what I said, the handle of the pump was removed on the following day."

John Snow, 1855

September 2010 Topics

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Sanford Doctor Diagnosed With Tuberculosis

On Aug. 28, 2010, Sanford Health in Fargo issued a news release stating that one of its physicians was diagnosed with infectious tuberculosis (TB). Sanford Health, Fargo-Cass Public Health and the North Dakota Department of Health are collaborating to manage the care and treatment of the individual with TB, as well as identify and test those who may have been exposed. Sixty-nine patients, 61 family members of patients and 56 employees are considered to be contacts to the physician. Testing for patients and their family members who were identified as contacts is being offered for free through the North Dakota Division of Laboratory Services.

Baseline testing for all of the contacts has been completed for all but two patients and 15 family members of patients. The incubation period for TB is eight to 10 weeks; therefore, follow-up testing is just beginning. Based on the clinical information about the physician with TB, the likelihood of transmission is low. Once the results of the follow-up testing are available, they will be analyzed to ensure that no further testing is necessary. All contacts with positive test results will be referred for chest X-rays to rule out active TB. Those who have positive test results and negative chest X-rays are considered to have latent TB infection, and will be referred for preventative therapy with anti-tuberculosis medication provided by the state.

TB is a serious disease that can be fatal if not treated properly. It is estimated that 25 percent of the world's population is infected with TB. About 10 percent of healthy individuals with latent TB infection will develop active TB over their lifetime. Certain things put some people at higher risk of developing active TB, such as HIV/AIDS, diabetes and treatment with immune-suppressing drugs. Active TB disease can be cured with at least six months of therapy with multiple antibiotics. Symptoms of TB include prolonged coughing, fever, night sweats, unexplained weight loss and blood in the sputum. If you have any questions about TB, please contact Rachel Birk, TB coordinator for the North Dakota Department of Health, at 701.328.2377 or rbirk@nd.gov. For TB resources and statistics, visit the TB program website at www.ndhealth.gov/disease/tb.



Tularemia Reported in North Dakota

A case of tularemia was reported to the North Dakota Department of Health (NDDoH) in August 2010. Since 2000, there have been 10 tularemia cases reported.

The patient presented to the clinic with leg cellulitis sepsis and a general feeling of being sick. A blood specimen was collected and tested positive for tularemia by PCR. The patient progressed to develop cough, chest pain, pneumonia, and shortness of breath and had multiple system organ failure. This patient had multiple pre-existing medical conditions that were the contributing factors to the patient's outcome according to death certificate records. No apparent risk-factors for the patient were identified.

The signs and symptoms of tularemia include fever accompanied by varying symptoms depending on the route of entry into the body. These symptoms can include ulcers on the skin or mouth, swollen and painful lymph glands, swollen and painful eyes, and a sore throat. Pneumonia also can develop in the most serious form of the disease. This form develops when people breathe in dust or aerosols that contain the bacteria that causes tularemia.

For more information about tularemia, visit the NDDOH website at www.ndhealth.gov/disease.



Fall Is Just Around the Corner... and So Is the Influenza Season

Typically, the flu season starts in October and runs through May, but cases can occur at any time of the year. Influenza seasons are unpredictable as to when activity will begin, how long it will last, severity of illness and which viruses will circulate in communities. Last year, the pandemic 2009 H1N1 influenza virus circulated widely, with more than 90 percent of the sub-typed viruses identified as the pandemic strain. It is not known which viruses will circulate or will be the predominant strain this upcoming season, but it is very likely that the 2009 H1N1 influenza virus will circulate, as well as other seasonal influenza viruses.

As soon as vaccine is available, it can be offered to patients. The 2010-2011 influenza vaccine recommendation is to vaccinate everyone 6 months and older. REMEMBER: Influenza vaccine can be offered now and throughout the flu season.

The North Dakota Department of Health (NDDoH) influenza website is updated weekly with the latest influenza data. For more information about influenza or, the surveillance program, or to order free educational materials, visit the NDDoH influenza website at www.ndflu.com.



HAI: CMS Ruling

The Centers for Medicare and Medicaid Systems (CMS) has put into place a new ruling for reporting healthcare-associated infections (HAI). Effective for discharges starting Jan. 1, 2011, hospitals that comply with Reporting Quality Hospital Data for Annual Payment Update (RHQDAPU) requirements, will receive a full Medicare payment update for 2013. This is being accomplished by tying hospitals' annual payment update to submission of infection data through the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network (NHSN). In North Dakota, eight hospitals comply with the RHQDAAPU requirements.

Central line-associated bloodstream infections in the intensive care units and high-risk nurseries will be the first HAIs to be required for reporting starting Jan. 1, 2011, with surgical site infections to follow Jan. 1, 2012. CDC is expecting that these requirements will continue to stress the importance of programs to prevent and eliminate healthcare-acquired infections.

The NDDoH, in conjunction with CDC, will be providing training about HAI definitions, surveillance and reporting through NHSN for all facilities in the state on Nov. 3 and 4, 2010.

To read more about the CMS ruling, see the resources listed below.

CMS Press Release:

www.cms.gov/apps/media/press/release.asp?Counter=3804&intNumPerPage=10&checkDate=&checkKey=&srchType=1&numDays=3500&srchOpt=0&srchData=&keywordType=All&chkNewsType=1%2C+2%2C+3%2C+4%2C+5&intPage=&showAll=&pYear=&year=&desc=&cboOrder=date

NHSN:

www.cdc.gov/nhsn/cms-welcome.html

Hospital Compare:

hospitalcompare.hhs.gov/

RHQDAPU:

www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1138115987129

Quality Net:

www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetHomepage&cid=1120143435363

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The pump handle picture in the title was obtained from the website www.ph.ucla.edu/epi/snow.html.



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