

**Alabama Department of Public Health (ADPH)
Alabama Emergency Response Technology (ALERT)
Health Alert Network (HAN)
November 14, 2022**

The Alabama Department of Public Health Reminds Health Providers to Report Influenza Deaths to Public Health and Encourages Participation in Respiratory Surveillance Networks

The 2022-2023 influenza season has shifted into high gear right out of the gate with early increases of influenza-like illness (ILI) activity reported in most parts of the state. The percentage of outpatient visits statewide due to ILI is at 11.54% (2022-2023 baseline: 3.27%). This represents the highest activity we have seen this early in the season since the influenza A/H1N1 pandemic in 2009.

Anecdotally, there have been multiple reports of children under the age of 18 years who have died and were positive for influenza. Only one pediatric influenza-associated death has been reported to ADPH in 2022. Although influenza is not a reportable disease in Alabama, influenza-associated deaths (adult and pediatric) must be reported to public health within 5 days and any suspicion of a novel influenza A case must be reported immediately. Required reporters include physicians, dentists, nurses, medical examiners, hospital administrators, nursing home administrators, lab directors, school principals, and child care center/Head Start directors.

Healthcare providers can make an impact by participating in two surveillance programs. Outpatient ILI Surveillance Network (ILINet) and Virologic Surveillance. ILINet is a network of healthcare providers across the nation who report the proportion of patients seeking care for influenza-like illness (fever plus cough and/or sore throat) weekly to CDC. This system allows CDC and ADPH to track levels of medically-attended influenza-like illness over the course of the influenza season. If you are interested in becoming a participant in the ILINet program, please complete an [ADPH ILINet Application](#).

Participating in ADPH's Virologic Surveillance program aids public health and clinical partners alike in knowing which respiratory viruses (e.g., influenza, SARS-CoV-2, and RSV) are circulating in the community and causing illness. As a part of this program, healthcare providers are asked to submit two specimens per week from patients residing in separate households, with ILI or COVID-19-like illness and no other known cause, to the state public health laboratory for testing. Specimens positive for influenza will be further subtyped and sequenced. Specimens positive for SARS-CoV-2 will be sequenced to determine lineage. For those specimens negative for influenza and SARS-CoV-2, a select percentage will be tested for additional respiratory viruses. If you are interested in becoming a participant in the Virologic Surveillance program, please contact the Influenza Coordinator in the Infectious Diseases & Outbreaks Division at 334-206-5971.

Additional Resources:

- CDC Health Alert: <https://emergency.cdc.gov/han/2022/han00479.asp>
- [Influenza \(Flu\): Healthcare Providers](#)
- [Influenza \(Flu\): Influenza Laboratory Testing](#)
- [Influenza \(Flu\): Data and Surveillance](#)