## Administrative Statistics, Statewide and Regionally

Report Time Period: 01/01/2010 – 03/31/2010

#### **Foodborne Diseases**

#### **Days from Onset to Referral**

#### Location Median Max Location Average Median Ν Average Ν Max 54 10.04 7.72 R1 8 73 R1 81 30 5 7 R2N 14.91 R2N 7.77 32 110 10 103 142 9.96 R2S 83 34 R2S 138 16.8 13 93 8 R3 22 7.73 7 17 R3 48 6.88 4 31 R5 57 15.46 12 84 R5 81 8.91 4 51 11 R6 56 12.91 9 39 R6 103 13.52 56 40 R7 32 7.66 6 R7 42 5.88 4 18 R8 13 11.23 9 30 R8 21 13.05 7 49 12.12 7 Statewide 427 9 103 Statewide 656 10.69 93

**Days from Referral to Completion** 

## Hepatitis – Acute Viral: A, B, C, D, E

#### **Days from Onset to Referral Days from Referral to Completion** Location Median Location Ν Median Ν Average Max Average Max R1 2 4.5 5 6 R1 19 11.42 6 33 R2N 7 19 13 43 R2N 10 4.9 5 12 R2S 20 R2S 3 10.33 12 16 71 20.75 60 R3 8 4.25 4 7 R3 45 8.82 5 57 8.75 10 12 24 3 R5 4 R5 9.96 43 10.8 R6 2 32.5 33 56 R6 15 12 28 2 R7 12 12 14 R7 9 15.89 8 53 R8 4 7.5 7 11 R8 17 21 5 84 7 32 11.28 56 210 14.46 8 84 Statewide Statewide

### Meningitis

Days from Onset to Referral				Days from Referral to Completion					
Location	Ν	Average	Median	Max	Location	Ν	Average	Median	Max
R1	59	8.15	6	46	R1	81	8.16	6	52
R2N	60	7.73	6	26	R2N	97	5.01	4	26
R2S	42	7	5	25	R2S	94	22.45	18	77
R3	21	4	3	12	R3	46	5.8	3	28
R5	42	7.36	5	35	R5	64	9.98	4	48
R6	50	7.1	6	23	R6	54	12.17	8	43
R7	13	9.38	7	39	R7	13	2.85	1	10
R8	5	9	9	15	R8	6	20.5	18	44
Statewide	292	7.38	5	46	Statewide	456	10.92	6	77

Days from Onset to Referral				Days from Referral to Completion					
Location	Ν	Average	Median	Max	Location	Ν	Average	Median	Max
R1	11	22.18	10	90	R1	17	14.88	10	64
R2N	22	15.68	11	49	R2N	31	7.32	4	56
R2S	26	13.96	11	58	R2S	48	17.98	13	44
R3	20	13.45	7	101	R3	48	4.67	4	26
R5	8	8	7	13	R5	28	9.61	7	43
R6	15	18.4	8	101	R6	29	13.72	13	41
R7	2	3.5	4	7	R7	4	8.5	7	19
R8	1	22	22	22	R8	5	19	6	79
Statewide	105	15.14	9	101	Statewide	210	11.25	7	79

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# Vaccine Preventable Diseases

Days from Onset to Referral				Days from Referral to Completion					
Location	Ν	Average	Median	Max	Location	Ν	Average	Median	Max
R1	84	15.11	10	60	R1	128	10.05	6	55
R2N	123	10.28	6	83	R2N	177	6.38	4	33
R2S	61	12.02	9	75	R2S	112	13.65	10	79
R3	76	7.88	7	51	R3	153	6.3	3	54
R5	45	7.02	6	37	R5	77	6.57	2	49
R6	36	11.08	6	63	R6	92	10.9	6	41
R7	15	9.93	10	21	R7	17	8.53	8	22
R8	47	8.45	5	82	R8	54	10.48	7	64
Statewide	487	10.53	7	83	Statewide	810	8.8	5	79

## Vectorborne Diseases

### Days from Onset to Referral

# Days from Referral to Completion

Location	N	Average	Median	Max	Location	N	Average	Median	Max
R1	2	9.5	10	11	R1	9	9.22	7	24
R2N	2	25	25	46	R2N	3	24.33	7	59
R2S	5	12.2	11	19	R2S	7	9.57	8	15
R3	0	0	0	0	R3	1	0	0	0
R5	0	0	0	0	R5	3	3.33	4	4
R6	0	0	0	0	R6	1	30	30	30
R7	0	0	0	0	R7	0	0	0	0
8	2	32	32	52	R8	6	17	14	31
Statewide	11	17.64	11	52	Statewide	32	11.59	8	59

# Administrative Reports Interpretation Guide



#### Dates:

Onset Date=the first day the case experienced symptoms. This date is a usergenerated value and may not be available for all cases.

Referral Date=theoretically the date the case was referred to the Health Department and therefore entered into the MDSS. This date is automatically generated by the system as the date the case was entered into the MDSS but can be changed manually if desired, but must be no more than 90 before the system generated date. This value is available for all cases.

Completion Date=the date the case was marked as "completed." This date is a system-generated value, is only available for cases marked as "completed" in the investigation status field. It will not change even if a case is reopened in the future.

### Please consider:

Both Individual and Aggregate counts are included.

To be included in the analysis, a case must have an onset date during the specified time period (if onset date is missing, then referral date is used).

If a case is not "completed," the number of days from referral to completion is not available and it will not be included in the Referral to Completion analysis.

If the onset date is missing, the number of days from onset to referral is not available for that case and will not be included in the Onset to Referral analysis.

Prior to the March 13<sup>th</sup>, 2009 MDSS upgrade if a case were re-opened and the investigation status marked as "completed" a second time, the case completion date was changed to the most recent date. For example, if a case was completed on Jan 1<sup>st</sup>, 2005 and then re-opened and completed again on March 1<sup>st</sup>, 2005 the completion date available for calculation is March 1<sup>st</sup>, 2005. For cases marked completed after the March 13<sup>th</sup>, 2009 MDSS upgrade, the original case completion date is static and will not change even if the case is reopened.

Theoretically, referral date is the date that the case is received by the local health department and therefore entered into the MDSS, however, this is not always the case and the referral date is changeable by the LHD.

### Statistics:



N=number of cases used to determine the Average and Maximum valu

Average=the average (also called the mean) number of days between the Onset Date the Referral Date (or between the Referral Date and the Completion Date). Additionally, the mean can be influenced by outlying values.

Median= the middle number in a given sequence of numbers

Maximum=the largest number of days between Onset to Referral (or Referral to Completion)

#### Additional points to consider when interpreting this report:

It is important to keep in mind that administrative report results can vary widely. Factors affecting the administrative report results include:

- 1) The date on which the report is run. The specific cases included in the analysis can change as cases are entered, investigated and closed.
- 2) The number of cases / characteristics of cases included in the analysis. Small sample sizes (N) are subject to outlying data. For example, if your jurisdiction only has a couple of VPDs during a certain time frame and it takes an unusually long time to investigate one of them or a lab report was delayed, the time between Onset and Referral and Referral and Completion may be artificially elevated. Additionally, remember that the mean is more likely to be influenced by outlying values than the median.

# **Disease within Categories:**

#### Foodborne:

Amebiasis Botulism - Foodborne Campylobacter Cryptosporidiosis Escherichia coli 0157:H7 Giardiasis Listeriosis Salmonellosis Shiga toxin, E. Coli, Non O157 Shiga toxin, E. Coli, Unsp Shigellosis Typhoid Fever Yersinia enteritis

#### **Meningitis:**

Meningitis - Aseptic Meningitis - Bacterial Other Meningococcal Disease Streptococcus pneumoniae, Inv

#### Other Diseases:

Anthrax Blastomycosis Botulism - Infant Botulism - Other Brucellosis Cholera Coccidioidomycosis Creutzfeldt-Jakob Disease Cryptococcosis Cyclosporiasis Encephalitis, Post Chickenpox Encephalitis, Post Mumps Encephalitis, Post Other Encephalitis, Primary Flu Like Disease\* Guillain-Barre Syndrome Hantavirus Hantavirus, Other Hantavirus, Pulmonary Head Lice Hemolytic Uremic Syndrome Hemorrhagic Fever Hepatitis - Unspecified

#### Other Diseases Continued

Histoplasmosis Influenza Influenza, Novel Kawasaki Legionellosis Leprosy Leptospirosis Plague Psittacosis Q Fever Acute Q Fever Chronic Q Fever\* Rabies Human Reve Syndrome **Rheumatic Fever** Rubella - Congenital Staphylococcus Aureus Infect. Strep Pneumo, Drug Resistant Strep Throat Streptococcal Dis, Inv, Grp A Streptococcal Toxic Shock Toxic Shock Trachoma Trichinosis Tularemia Unusual Outbreak or Occurrence VISA VRSA Vibriosis - Non Cholera

### VPD:

Chickenpox (Varicella) Diphtheria H. influenzae Disease - Inv. Measles Mumps Pertussis Polio Rubella Shingles Tetanus VZ Infection, Unspecified



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#### Vectorborne:

Dengue Fever Ehrlichiosis\* Ehrlichiosis, Anaplasma phagocytophilum Ehrlichiosis, Ehrlichia chaffeensis Ehrlichiosis, Ehrlichia ewingii Ehrlichiosis, human granulocytic\* Ehrlichiosis, human monocytic\* Ehrlichiosis, human other/undetermined Ehrlichosis human, other, unsp\* Encephalitis, California Encephalitis, Eastern Equine Encephalitis, Powassan Encephalitis, St. Louis Encephalitis, Western Equine Lyme Disease Malaria Rocky Mt Spotted Fever Typhus West Nile Virus Yellow Fever