

Technical Notes for January 2, 2011 – December 31, 2011 New Jersey Reportable Communicable Disease Summary Report (excludes sexually transmitted diseases [chancroid, chlamydia, granuloma inguinale, gonorrhea, lymphogranuloma venereum, syphilis], HIV/AIDS and tuberculosis)

- The report includes **NJDOH-approved confirmed** cases for the following diseases.
AMOEBIASIS
BOTULISM – FOODBORNE
BOTULISM – INFANT
BOTULISM - OTHER, UNSPECIFIED
BOTULISM - WOUND
CAMPYLOBACTERIOSIS
CHOLERA - O1
CHOLERA - O139
EBOLA
HANTAVIRUS PULMONARY SYNDROME
HEPATITIS A
HEPATITIS B – ACUTE
HEPATITIS B – CHRONIC
HEPATITIS B - PERINATAL
HEPATITIS C – ACUTE
HEPATITIS C – CHRONIC
INFLUENZA, HUMAN ISOLATES - TYPE A (SUBTYPING NOT DONE)
INFLUENZA, HUMAN ISOLATES - TYPE A H1
INFLUENZA, HUMAN ISOLATES - TYPE A H3
INFLUENZA, HUMAN ISOLATES - TYPE B
INFLUENZA, NOVEL INFLUENZA A
LASSA FEVER
LEGIONELLOSIS
LEPROSY (HANSEN DISEASE)
LISTERIOSIS
MALARIA
MEASLES
MARBURG
POLIOMYELITIS
RABIES
RUBELLA - NON-CONGENITAL
STREPTOCOCCUS AGALACTIAE (GBS)
STREPTOCOCCUS PNEUMONIAE
STREPTOCOCCUS PYOGENES (GAS) - WITHOUT TOXIC SHOCK SYNDROME
TETANUS
TRICHINOSIS
VANCOMYCIN-INTERMEDIATE STAPHYLOCOCCUS AUREUS (VISA)
VANCOMYCIN-RESISTANT STAPHYLOCOCCUS AUREUS (VRSA)
VIRAL HEMORRHAGIC FEVERS OTHER (NOT MARBURG, EBOLA, LASSA)
YERSINIOSIS
- This report includes both **NJDOH-approved confirmed AND probable** cases for the following diseases.
ANTHRAX
ANTHRAX - CUTANEOUS

ANTHRAX - INHALATION
ANTHRAX - INTESTINAL
ANTHRAX - OROPHARYNGEAL
BABESIOSIS
BRUCELLOSIS
CALIFORNIA ENCEPHALITIS(CE)
CREUTZFELDT-JAKOB DISEASE
CREUTZFELDT-JAKOB DISEASE - FAMILIAL
CREUTZFELDT-JAKOB DISEASE - IATROGENIC
CREUTZFELDT-JAKOB DISEASE - NEW VARIANT
CREUTZFELDT-JAKOB DISEASE - SPORADIC
CREUTZFELDT-JAKOB DISEASE - UNKNOWN
CRYPTOSPORIDIOSIS
CYCLOSPORIASIS
DENGUE FEVER
DIPHThERIA
EASTERN EQUINE ENCEPHALITIS(EEE)
EHRlichIOSIS/ANAPLASMOSIS - ANAPLASMA PHAGOCYTOPHILUM
(PREVIOUSLY HGE)
EHRlichIOSIS/ANAPLASMOSIS - EHRlichIA CHAFFEENSIS (PREVIOUSLY
HME)
EHRlichIOSIS/ANAPLASMOSIS - EHRlichIA EWINGII
EHRlichIOSIS/ANAPLASMOSIS - UNDETERMINED
GIARDIASIS
HAEMOPHILUS INFLUENZAE
HEMOLYTIC UREMIC SYNDROME
LACROSSE ENCEPHALITIS(LSE)
LYME DISEASE
MENINGOCOCCAL DISEASE (NEISSERIA MENINGITIDIS)
MUMPS
PERTUSSIS
POWASSAN ENCEPHALITIS
PSITTACOSIS
Q FEVER – ACUTE
Q FEVER – CHRONIC
ROCKY MOUNTAIN SPOTTED FEVER
RUBELLA - CONGENITAL
SALMONELLOSIS - NON TYPHOID
SALMONELLOSIS - TYPHOID FEVER
SARS
SHIGA TOXIN–PRODUCING E.COLI (STEC) - NON O157:H7
SHIGA TOXIN–PRODUCING E.COLI (STEC) - O157:H7
SHIGELLOSIS
SMALLPOX
ST LOUIS ENCEPHALITIS (SLE)
STREPTOCOCCUS PYOGENES (GAS) - WITH TOXIC SHOCK SYNDROME
TOXIC SHOCK SYNDROME – STAPHYLOCOCCAL
TULAREMIA
VARICELLA
VIBRIO INFECTIONS (OTHER THAN V.CHOLERAE SPP.)
WEST NILE VIRUS (WNV)

WESTERN EQUINE ENCEPHALITIS(WEE)
YELLOW FEVER

- This report includes **NJDOH-approved confirmed, probable AND possible** cases for the following diseases.
PLAGUE
- Diseases listed above which are designated as nationally notifiable by the Centers for Disease Control are reported to CDC per MMWR print criteria. Some exceptions include:
 - DIPHTHERIA, HAEMOPHILUS INFLUENZAE, MUMPS, PERTUSSIS, ROCKY MOUNTAIN SPOTTED FEVER, RUBELLA – CONGENITAL, and VARICELLA should include confirmed, probable, and unknown cases for CDC reporting. However, New Jersey does not utilize “unknown” case status in disease reporting. New Jersey reports confirmed and probable cases only.
 - New Jersey reports confirmed MEASLES, RUBELLA - NON-CONGENITAL, and TETANUS cases only.
 - New Jersey reports confirmed, probable, and possible PLAGUE cases.
- CREUTZFELDT-JAKOB DISEASE -- Cases are classified as confirmed or probable according to date of death. With Creutzfeldt-Jakob disease, date of death may be in the calendar year following identification of suspect cases. As such, the total number of cases in the CDRSS report is preliminary and may change when additional suspect cases are classified.
- CRYPTOSPORIDIOSIS – Confirmed and probable case classification will be distinguished from each other in the MMWR annual summary, not weekly tables.
- DENGUE FEVER – 2011 cases are not counted in the CDC MMWR notifiable disease statistics.
- **FOODBORNE INTOXICATIONS – CIGUATERA, FOODBORNE INTOXICATIONS - MUSHROOM POISONING, FOODBORNE INTOXICATIONS - PARALYTIC SHELLFISH POISONING, and FOODBORNE INTOXICATIONS - SCOMBROID**
There are no formal case definitions for foodborne poisonings. These counts represent all reported cases of foodborne poisonings diagnosed by a healthcare provider and any clinically compatible cases epidemiologically linked to a diagnosed case.
- HEPATITIS A -- The NJDOH case definition for a confirmed case of acute HEPATITIS A was revised as of 1/1/05. Thus, HEPATITIS A statistics cannot be compared to data prior to 2005.
- HEPATITIS B - PERINATAL– As of August 21, 2012, there are 2 confirmed perinatal hepatitis B infections reported. Both cases completed post vaccine serology (PVS) testing during the first half of 2012. One case was born in 2011 (Monmouth County) and the other case was in 2010 (Atlantic County). The Perinatal Hepatitis B prevention program receives an average of 400 cases of hepatitis B infected pregnant women annually. The program completes case management for all infants born to hepatitis B infected women to ensure completion of the hepatitis B vaccine series and PVS testing.

- INFLUENZA - There are no formal case definitions for influenza. NJDOH accepts any positive influenza test (i.e., rapid antigen, PCR, culture) as a confirmed report of influenza. Reports are received from commercial laboratories, acute care laboratories and the state public health laboratory. These counts represent only reported cases and do not represent all influenza positive influenza cases occurring in the state.
- INFLUENZA, NOVEL INFLUENZA A - Cases reported in 2011 under this disease represent cases with a positive influenza test for 2009 H1N1. These reports are not counted in the CDC MMWR notifiable disease statistics.
- KAWASAKI DISEASE – No longer reportable in New Jersey.
- LYME – The case definition was changed in 2008 to report confirmed, probable and possible cases to NJDOH. Only confirmed cases were reported to NJDOH and CDC prior to 2008. Only confirmed and probable cases are currently reported to CDC.
- Q FEVER - ACUTE and Q FEVER - CHRONIC were added to the nationally notifiable disease list in 2008 to report confirmed and probable. Only Q FEVER, with no subcategory, was reported to NJDOH prior to 2008.
- SHIGA TOXIN–PRODUCING E.COLI (STEC) - NON O157:H7 and SHIGA TOXIN–PRODUCING E.COLI (STEC) - O157:H7 were reported to CDC as Confirmed and Probable only from 2011. All cases were reported to CDC prior to 2011.
- STREPTOCOCCUS PYOGENES (GAS) - WITH TOXIC SHOCK SYNDROME – 23 cases of GAS – without toxic shock syndrome was included in the CDRSS historical database. There was one additional case of GAS classified as GAS – with toxic shock syndrome after CDRSS historical database created. A total of 24 cases were reported in New Jersey in 2011.
- STREPTOCOCCUS PYOGENES (GAS) - WITHOUT TOXIC SHOCK SYNDROME – 166 cases of GAS – without toxic shock syndrome was included in the CDRSS historical database. There were two additional cases of GAS classified as GAS – without toxic shock syndrome after CDRSS historical database created. A total of 168 cases were reported in New Jersey in 2011. This disease was deleted from nationally notifiable disease list in 2010.
- Please consult the Communicable Disease Service at 609-826-5964 or <http://nj.gov/health/cd/find.shtml> for case definitions of reportable diseases listed in the report.
- Data source: New Jersey’s CDRSS 2011 historical report (database created on May 24, 2012)
- This report is for public health use only. DATA WITH VALUES LESS THAN FIVE SHOULD NOT BE RELEASED TO THE PUBLIC WITHOUT ACCOMPANYING INTERPRETATION. Rates calculated from these numbers are statistically unreliable for interpretation.