

ODH DOC SITUATION REPORT

Report Date: 1700 October 16 2009

Event Type: Public Health Emergency

Operational Period: October 14 through October 20 2009

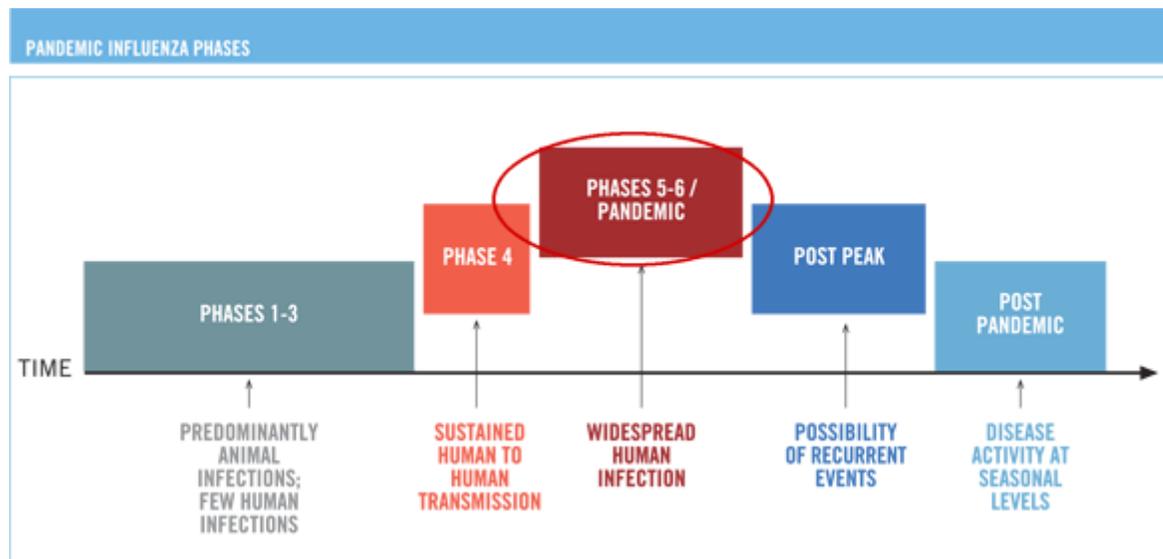
Ohio Public Health Situation

Disaster/Hazard/Disease Type:	H1N1
WHO Phase:	6 - Widespread Human Infection
Governor Emergency Proclamation:	Yes, on October 7, 2009
State EOC:	CAS Level 1
ESF 8 Desk Staffed: NO (on standby)	Number: (614) 799-6444
ODH ICS activated: YES IC: Roger Suppes	Number: (614) 752-9871
ODH DOC activated: YES POC: Jeff Jones	Number: (614) 644-3435
OHIO H1N1 DEATHS:	CONFIRMED 8

World Health Organization:

As of 11 October 2009, worldwide there have been more than 399,232 laboratory confirmed cases of pandemic influenza H1N1 2009 and over 4735 deaths reported to WHO. Compare this to: As of 4 October 2009, worldwide there have been more than 375,000 laboratory confirmed cases of pandemic influenza H1N1 2009 and over 4500 deaths reported to WHO.

The current WHO phase of pandemic alert is 6.



Current Status:

The Ohio Department of Health has activated the ODH Incident Command System (ICS) to manage the fall H1N1 incident. As of October 16th the number of ODH activated staff is 214.

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The ODH H1N1 Flu line received 559 calls on 10/15/09, (0 of which needed Spanish translation), including 20 voicemails, bringing the total number of calls from 1:00 p.m. on 9/23/09 to 9:00 p.m. 10/15/09 to 2569. The majority of the calls are still about when vaccines will be available and where they can be received.

Incident Objectives:

ODH will coordinate, facilitate and provide for the distribution of all H1N1 vaccines, antivirals, and related materials throughout Ohio as made available.

1. ODH will order and report vaccines to CDC in accordance with Vaccine Allocation and Ordering Plan 2009.
2. ODH will report to CDC school and daycare closings.
3. ODH will distribute, Affirm (antiviral and PPE) Delivery and Report to CDC.
4. ODH will provide general information to the public and technical assistance to providers/patient registration
5. ODH will conduct daily surveillance on hospitals, pediatricians, and deaths.
6. ODH will monitor Medical Surge and provide HAvBed Reporting to CDC.

Planning Updates:

The SNS RSS has shipped out all of its materiel. The SNS program is working to prepare for additional materiel and is following up with counties regarding their confirmation of delivery. The program has completed two medical countermeasure situation reports for local health departments to complete on a weekly basis. These reports will help ODH keep track of how much antivirals and PPE are still available from the SNS cache. No information is available as to whether CDC will send out any additional portion of the Stockpile.

Interventions - Related to Prevention & Response:

Currently, personal protective measures include: covering your cough, monitoring for fever if ill, eating properly and getting plenty of rest. There are also isolation practices in place for those in institutions who are ill with influenza like illness (referred to as droplet isolation).

- Investigations are ongoing for clusters, outbreaks and hospitalizations.
- Anti-virals are currently being distributed across the state to hospitals and county drop sites for treatment.
- It is anticipated that Vaccines will be received in the next day or two and they will be distributed from the ODH Immunization Warehouse. In the future, vaccines will be direct shipped from the pharmaceutical and healthcare distributor McKesson.
- There is an increase in influenza activity in the state; however, there is no medical surge response needed at this time. ODH will work with OHA to provide a web teleconference for hospitals to enroll as providers and assist hospital healthcare workers to enroll for vaccination.

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Disease Parameters:

The Pandemic strain of H1N1 2009 continues to demonstrate symptoms in individuals much like seasonal influenza. Illness is initially asymptomatic (showing no evidence of disease); progressing to body aches, possible fever, tiredness, and decrease in appetite, upper respiratory symptoms and resolution of illness.

- Some Individuals have progressed to extreme illness. Although this is not common. Individuals are encouraged to see their primary physician if they need treatment or if their illness progresses.

Expenditures:

The total payroll cost is \$96,970.58 for 67 staff and total procurement cost is \$214,886.80.

Impact on Individuals:

- Incidence of confirmed influenza-associated hospitalizations in 2009-2010 season: 290, of which 125 are laboratory confirmed as Pandemic (H1N1) 2009 Influenza (as of 10/13/09).
- Incidence of year-to-date confirmed influenza-associated hospitalizations: 1018, of which 209 are laboratory confirmed as Pandemic (H1N1) 2009 Influenza. See Pandemic (H1N1) 2009-related hospitalizations graph (as of 10/13/09).
- Year-to-date confirmed Pandemic (H1N1) 2009 Influenza-related deaths: 8.
- Some individuals who are ill are not requiring prescriptions for anti-virals, nor do they require a visit to their physician. There have been deaths associated with influenza like illness and/or pneumonia; thus, individuals are encouraged to see their primary care physician if symptoms are not resolving with over-the-counter medications.
- Individuals are being advised to not take aspirin for fevers as this can cause other complications with a viral illness such as Reye's syndrome.

Resources:

Additional resources were allotted to support field operations for the SNS program.

Incident Potential:

To be determined

Weather and Effects:

Today we have a high of 43 and a low of 36, 30% chance of storms. Weather may not effect transportation of anti-virals.