

GA EMERGING INFECTIONS PROGRAM

The Emerging Infections Program (EIP) is a collaborative effort between the Centers for Disease Control and Prevention, the United States Department of Agriculture, the Food and Drug Administration, 11 states including Georgia, and in some states, their academic partners. Georgia became an EIP member in 1996 with activities in the 8 counties of metropolitan Atlanta. The EIP was extended to cover the entire state of Georgia in 1999. All states with EIPs have two core active, laboratory-based surveillance systems: Active Bacterial Core Surveillance (ABCs) and FoodNet.

ABCs organisms include invasive Group A Streptococcus, Group B Streptococcus, and *Streptococcus pneumoniae* in the 20-county Atlanta Metropolitan Statistical Area (MSA), invasive MRSA in Health District 3, and invasive *Haemophilus influenzae* and *Neisseria meningitidis* statewide. Variables collected for ABCs organisms include name of the patient, address, phone number, date of birth, age, gender, race, ethnicity, date the specimen was collected, the organism, specimen source, hospitalization, place of hospitalization, outcome, nursing home residence if applicable, type of infection, and prior illness or underlying causes.

FoodNet organisms under surveillance include *Campylobacter*, *Cryptosporidium*, *Cyclospora*, *E. coli* (O157& shiga toxin positive), *Listeria*, *Salmonella*, *Shigella*, *Vibrio*, and *Yersinia* statewide. Variables collected for FoodNet organisms, include name of the patient, address, phone number, date of birth, age, gender, race, ethnicity, date the specimen was collected, the organism, any serotype or species information, specimen source, hospitalization, outcome, and travel history on all patients

Active surveillance is conducted at least once a month (usually twice a week in the Atlanta area) by phone, fax, email, or in person in every laboratory in the state that conducts microbiology. Active surveillance is done to obtain additional information and validation of EIP organisms, ensure isolates are sent to the state public health lab, and foster a relationship with the labs/hospitals. Active surveillance is different from passive reporting and is NOT replaced by SENDSS reporting. Through active surveillance, we obtain more accurate and timely disease reports and, therefore determine Georgia's burden of illness more precisely. Active surveillance has vastly improved data quality in Georgia

The EIP attempts to obtain all relevant isolates for further laboratory testing including pulsed-field gel electrophoresis (PFGE) and serotyping. For labs within the metropolitan Atlanta area, EIP staff or couriers will pick up isolates of interest. The testing of EIP organisms is provided free of charge for all Georgia EIP laboratories. The data received from this additional laboratory testing has allowed identification and investigation of numerous outbreaks and clusters.