



**TO:** West Virginia Healthcare Providers, Hospitals and other Healthcare Facilities

**FROM:** Rahul Gupta, MD, MPH, FACP  
Commissioner and State Health Officer  
WV Department of Health and Human Resources, Bureau for Public Health

**DATE:** July 14, 2017

**LOCAL HEALTH DEPARTMENTS:** PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HOSPITAL-BASED PHYSICIANS, INFECTION CONTROL PREVENTIONISTS, LABORATORY DIRECTORS, AND OTHER APPLICABLE PARTNERS

**OTHER RECIPIENTS:** PLEASE DISTRIBUTE TO ASSOCIATION MEMBERS, STAFF, ETC.

During the months of May and June 2017, West Virginia experienced more cases than expected of Legionnaire's Disease (*Legionella pneumonia*).

Clinical features of Legionnaire's Disease generally include radiographic evidence of pneumonia with cough, fever, myalgia, and chest pain; hospitalization is common. Additional information on Legionnaire's Disease can be found at <https://www.cdc.gov/legionella/clinicians.html>.

Urinary antigen assay and culture of respiratory secretions on selective media are the preferred diagnostic tests for Legionnaire's Disease. Respiratory secretions (sputum or bronchoalveolar lavage) should be collected before starting antimicrobial therapy from all suspected cases. More information on testing for Legionnaire's Disease can be found at <https://www.cdc.gov/legionella/clinicians/diagnostic-testing.html>.

The West Virginia Legislative Rule for Reportable Diseases, Events and Conditions (64CSR7) mandates cases of *Legionella pneumonia* be reported to the local health department within one week. During this time of heightened surveillance, physicians are requested to immediately investigate and report all suspected cases and clusters of *Legionella pneumonia* to their local health department. Contact information for local health departments in West Virginia can be found at [www.dhhr.wv.gov/localhealth/pages/map.aspx](http://www.dhhr.wv.gov/localhealth/pages/map.aspx).

Local health department staff should investigate all possible cases of Legionnaire's Disease thoroughly. Collected information should include date of onset, method of diagnosis, potential occupational or healthcare exposure, and travel history during the 2–14 days prior to symptom onset.

For more information, please visit [www.dide.wv.gov](http://www.dide.wv.gov) or call the Division of Infectious Disease Epidemiology (DIDE) at 1 (800) 423-1271, extension 1; (304) 558-5358, extension 1; or the answering service at (304) 925-9946.

This message was directly distributed by the West Virginia Bureau for Public Health to local health departments and professional associations. Receiving entities are responsible for further disseminating the information as appropriate to the target audience.

**Categories of Health Alert messages:**

**Health Alert:** Conveys the highest level of importance. Warrants immediate action or attention.

**Health Advisory:** Provides important information for a specific incident or situation. May not require immediate action.

**Health Update:** Provides updated information regarding an incident or situation. Unlikely to require immediate action.