



Florida Department of Health

**Cholera Guidance**

**Focus Area: Surveillance**

**Guidance document number 2010-1**

**Guidance for Conducting Enhanced Surveillance for Cholera for  
Emergency Departments, and Emergency Department Data and  
Clinic Managers**

Version 1      October 28, 2010

**Summary:**

- Report suspected cases of cholera (as required by Rule 64D-3, Florida Administrative Code) immediately to your county health department, 24/7.
- For the next 30 days, take a moment to make sure that the word “cholera” is in the chief complaint field for people who visit the ED and are suspected of having cholera.

The Florida Department of Health (FDOH) is enhancing its surveillance for cholera, because of concern about the possible introduction of cholera into Florida from the outbreak of cholera currently occurring in Haiti. We may see cholera in people who were recently in Haiti or have been in close contact with ill travelers returning from Haiti. Although cholera does not spread easily in developed countries such as the U.S., the FDOH wants to ensure that high-risk situations, such as cholera in a food-handler, clusters, or outbreaks are not missed.

Cholera is a reportable disease in Florida, and cases should be reported immediately upon initial suspicion by telephone to your County Health Department (CHD) as soon as the diagnosis is suspected, without waiting for confirmation. For example, if there is enough suspicion that the diagnosis in the patient under evaluation is cholera so that a specific stool culture for *Vibrio cholerae* is ordered, then please call the CHD immediately to report the case.

The goal of the FDOH is to identify, as rapidly as possible, any introduction of ill persons with cholera into the state through surveillance activities, to include monitoring the chief complaints of individuals presenting for care at hospital Emergency Departments (EDs) through the ESSENCE syndromic surveillance system.

- **In particular, we request that hospitals participating in the ESSENCE syndromic surveillance system add the word “cholera” to the chief complaint field for visits to EDs in persons who present for care with severe acute watery diarrhea where cholera infection is suspected.** (For example, "diarrhea, possible cholera" or "acute watery diarrhea – contact with someone recently in Haiti, possible cholera").
- **The FDOH anticipates conducting this enhanced surveillance effort for the next 30 days at which time a determination will be made whether this surveillance effort needs to be extended.**

The intent of this surveillance is to capture data on all persons presenting to EDs for care. This includes care provided for U.S. citizens returning from Haiti (whether residents, visitors, aid workers, volunteers, etc.) as well as any foreign nationals. The purpose of this surveillance is to ensure that appropriate laboratory tests are carried out and that appropriate control measures are taken for each case. The FDOH is not requesting that hospitals inquire about nationality or immigration status, or change their usual practices in any other way. It is understood that not all persons who become ill will present to EDs for care. Transmission of cholera introduced into a Florida community where sanitary conditions are inadequate is possible.