May 19, 2014

Dear Camp Operators:

The Fresno County Department of Public Health would like to prepare you for the 2014 camp season. Fresno County has also seen a marked increase in pertussis cases from last year; and measles remains a concern due to exposure to international travelers and/or unvaccinated people. Due to the highly contagious nature, norovirus is still a priority; therefore all campers must be screened upon arrival, in addition to screening for seasonal influenza.

Although the risk is relatively low, there have been recent cases of Middle East Respiratory Syndrome Coronavirus (MERS-CoV) reported in the United States. These cases are also associated with international travel. There have been cases of imported Chikungunya, a viral infection transmitted by mosquito species that have been found in Fresno, Madera and San Mateo counties. Lastly, extreme drought conditions in California bring about a new concern regarding wildfires, and subsequent air pollution. More information regarding these three topics can be found on the attachment entitled Notable Health Concerns.

**Pertussis**

Pertussis cases have dramatically increased this year. Symptoms of pertussis may mimic a common cold, and include a runny nose, sneezing, mild fever and a cough. These symptoms become more severe over time, and can involve coughing spells lasting several seconds. These coughing spells can lead to loud gasping sounds (whooping) as the person catches their breath, or may result in vomiting or choking. The “whooping” sound associated with pertussis may vary depending on the age of the individual.

**Measles**

Measles cases are still occurring and are primarily associated with importation from other countries, either residents returning to the United States after traveling abroad, or from foreign visitors. In many instances the patients were not vaccinated, or their vaccination status was unknown. Measles continues to be endemic in many worldwide locations. Unvaccinated people remain at risk, and increase the potential for community outbreaks. Prompt recognition and isolation can minimize the size of outbreaks in camp settings.

Measles symptoms include the presence of a fever AND a rash, in addition to a dry cough, runny nose, inflamed eyes or sensitivity to light. The fever can spike as high as 105°F. Measles rashes are red, flat blotchy maculopapular rashes that may start at the base of the hairline and face and spread across the rest of the body.
Facilitating the transmission of these diseases are their ability to spread easily from person to person, the multiple ways the virus/bacteria are transmitted, and the fact that a very low amount of virus/bacteria is sufficient to cause illness.

**Norovirus**

Norovirus continues to be a priority in California. Last year a strain of norovirus emerged, named GII.4 Sydney, and was responsible for more than 50% of reported norovirus outbreaks nationally. In 2014, a 100% of reported norovirus outbreaks have been reported as GII.4 Sydney in the State of California. Symptoms for norovirus or acute viral gastroenteritis may include a sudden onset of vomiting, nausea, diarrhea, abdominal cramps, headaches, and possibly a low grade fever. These symptoms occur approximately 24-48 hours after exposure. Previous exposure to any other norovirus strain or GII.4 Sydney strain confers zero long term protection. Approximately 6 months after experiencing a norovirus illness, people can become re-infected with the same strain.

**Disease Prevention and Detection**

In order to minimize the potential for an illness outbreak occurring in your camp, the following preventative measures shall be implemented:

1. All campers and employees must be screened upon arrival for symptoms of illness.
2. Affected campers and employees must be isolated from non-infected campers and employees.
3. All infected campers and employees must be prohibited from any type of food handling for a minimum of 72 hours after symptoms subside; and all staff and counselors shall monitor and strictly enforce hand washing.
4. If the number of illness reports exceeds your normal expectation for the camp season, or you suspect a common source for illnesses that are occurring, please contact the Community Health Division at (559) 600-3332 immediately for support, guidance and direction.
5. If you suspect a camper of having measles, the camper must be immediately isolated and the case should be reported to the Department of Public Health.

If an acute viral gastroenteritis outbreak occurs at your facility, the enclosed document entitled "Protocols for Prevention of Illness Outbreaks at Organized Camps" shall be implemented to minimize and help effectively manage the gastroenteritis outbreak through increased frequency and cleaning of affected areas utilizing a stronger concentration of disinfection solution.

Also included is a line-listing form for camp staff to compile data on ill campers and employees. This form shall be completed and submitted via fax to the Fresno County Community Health Division should an outbreak occur at your facility. The line-listing form can be faxed to (559) 600-7607.

If an outbreak cannot be promptly contained, temporary closure of the camp facilities may be required to break the cycle of infection. Immediate response by camp personnel is essential to minimize impacts to campers, employees and visitors.
If you have any questions regarding the handouts, or would like more information on any communicable disease, please contact the Community Health Division at (559) 600-3332 or check the website: www.fcdph.org. By providing you this information in advance, we can partner together to ensure that all campers have a safe and enjoyable experience.

Respectfully,

Glenn Allen, REHS, M.S., Interim Division Manager
Environmental Health Division

Joe Prado, Division Manager
Community Health Division

Enclosures

c:  David Pomaville, Director, Department of Public Health
Ken Bird, M.D., Interim Health Officer, Department of Public Health
David Luchini, RN, PHN, Assistant Director, Department of Public Health
NOTABLE HEALTH CONCERNS

Middle East Respiratory Syndrome Coronavirus (MERS-CoV)
MERS-CoV can cause severe respiratory illness and pneumonia. Worldwide a total of 263 cases, including 93 deaths have been laboratory confirmed, with 96% of the cases either resided in or traveled from Saudi Arabia, Qatar, Oman, Kuwait, Jordan or the United Arab Emirates (MERS-CoV endemic area).

Patients presenting with fever and respiratory symptoms (cough or shortness of breath) within 14 days after travel in the endemic area; or patients that had close contact with someone that has those symptoms and traveled the endemic area should be evaluated for MERS-CoV infection. Please notify this Department immediately to receive direction for obtaining respiratory, stool and serum samples for laboratory testing.

Chikungunya
Chikungunya is a viral infection characterized by acute fever often with severe joint pain. Complications from this viral infection while rare can lead to meningoencephalitis. Two suspected cases of Chikungunya have been reported in California, and are thought to be imported. The patients had traveled from Tonga, and to the Caribbean island of Dominica reflecting ongoing transmission in the South Pacific and Caribbean islands.

The virus is transmitted by the Aedes genus of mosquitoes, and recently has been detected in the California counties of Fresno, Madera and San Mateo. The Aedes genus of mosquito is also responsible for the transmission of dengue and yellow fever, and aggressively bites during the daytime. Therefore, precautions are necessary when outdoors. Campers should apply insect repellents that contain DEET, picaridin, oil of lemon eucalyptus or IR 3535 according to label instructions.

Wildfires
The existing drought conditions represent a significant fire danger. To date the number of fires in California has roughly doubled since last year. Wildfire smoke contains additional respiratory & eye irritants, and affects sensitive populations including children and individuals that have asthma or other chronic lung conditions. If there is an adverse air quality event due to wildfires, outdoor physical activity of campers should be minimized; and sensitive populations should be evaluated for breathing difficulties.

For additional information regarding these, please contact staff with the Communicable Disease Division at (559) 600-3332. Other resources include the following websites:

Centers for Disease Control and Prevention - Middle East Respiratory Syndrome
http://www.cdc.gov/chikungunya/ - Chikungunya Virus
http://cdfdata.fire.ca.gov/incidents/incidents_current - Current Fire Information
Illness Outbreak Line Listing

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<th>Date of Onset</th>
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<th>Fever</th>
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If the number of illness reports exceeds your norm for the camp season, or you suspect a common source for illnesses, please Fax to the Communicable Disease Division at (559) 600-7607
Protocols for Prevention of Illness Outbreaks
At Organized Camps

- Disinfect all horizontal surfaces beginning with the cleanest surface then moving to the dirtiest surface. For example; restrooms: clean lavatories/sinks, faucets, soap dispensers and finally toilets and floors. **Sanitizing solution shall consist of a minimum of ½ cup of bleach for every gallon of water.**

- Sanitizing solution shall be discarded between cleaning each facility (restroom, cabin, etc.) or shall be discarded more frequently if the facility is heavily soiled.

- Route of cleaning for cabins & dorms – door handles, horizontal surfaces, bed frames, mattress pads and floors. Porous items in cabins or dorms (i.e. rugs, pillows, etc.) shall be removed.

- Frequencies of cleaning for public areas such as restrooms shall be increased to 4x per day or more. Cleanup shall be immediate in areas such as restrooms, cabins, cafeteria/dining hall, etc. where an illness event has occurred. Additional measures shall be implemented to provide cleaning during nighttime hours.

- Increase the chlorine residual in the swimming pools and maintain a minimum of 3.0 ppm at all times.

- Disinfect all drinking fountains. Ensure that ice machines have been sanitized thoroughly. All ice shall be discarded for any ice machine that has the scoop left inside the machine. Ice scoops must be stored in a smooth, washable container outside of the machine.

- Submit to this Department for review and approval written instructions to be provided to all existing and incoming camp counselors that describes the protocol to be followed for reporting illnesses to the infirmary, reporting the location of illness events, handling ill campers during day and night hours, monitoring campers for washing their hands, etc.

- Increase number of isolation cabins to accommodate every ill camper. **Do not allow the return of symptomatic campers back to their cabins until vomiting and/or diarrhea events have ceased for a minimum of 24 hours.** Instruct patients to return to the infirmary immediately if symptoms reappear.

- All ill staff shall refrain from working for a minimum of 48 hours after symptoms cease. This includes non-food handling staff.

- Provide weekly updates via FAX two times per week every Wednesday & Friday by 3:00pm. All information shall be documented on the line listing form prepared and provided to you by the Department of Community Health. The line listing form shall document the following information: name, date of birth (DOB), camp, cabin assigned, time of symptom onset, description of symptoms, and job duties if illness is reported by a staff member.