

# State of Montana DPHHS HAN UPDATE

Distributed via the DPHHS Health Alert Network (HAN) System

Wednesday, May 13, 2009 2:25 PM

**DPHHS Contact Information: Communicable Disease 444-0273**

**DPHHS recommends you forward this HAN message on to your local HAN contacts.**

## **Update: H1N1 Influenza Cases**

There are now 4 confirmed cases of influenza A H1 (swine-like) in Montana. Ages range from 8 – 20. None have been hospitalized and all are recovering.

## **Laboratory Testing- Update & Revised Guidance**

From April 28 to May 12, over 750 specimens from persons with ILI were tested free of charge at the Montana Public Health Laboratory (MTPHL) for Influenza A. This is twice the number of specimens (450) that are normally tested during the traditional influenza season from October 2008 through April 27, 2009.

Of these specimens, 97 from 17 counties were positive for seasonal influenza A (both H1 and H3). Four specimens have been confirmed as influenza A H1 (swine-like).

These results confirm that influenza A, both seasonal and the recently identified A H1 (swine-like) strain is circulating in Montana.

MTDPHHS is now re-focusing the public health effort in order to assess the extent to which severe illness is occurring. Surveillance is now being focused on persons with severe illness (hospitalized) and special populations of interest including pregnant women and health care workers. We encourage providers from all areas of the state to submit respiratory specimens from persons hospitalized with symptoms that include ILI for influenza PCR testing and sub-typing at the MTPHL.

Effective May 14, 2009, influenza testing at MTPHL will be charged at the current published fee. This testing will no longer be provided free of charge. For questions regarding the fees or CPT codes, please phone MTPHL at 1-800-821-7284.

## **Extension of Tamiflu Expiration Dates**

**The Tamiflu distributed in the state stockpile is eligible for a two-year extension of its expiration date. Please make a note of this information and keep it with your supply as a reminder. The FDA is considering relabeling the product to reflect this and we'll provide more information as we receive it.**

Below is an excerpt of Q and A's that were provided by DSNS in regards to expiration dates of state stockpiles and relabeling requirements to reflect an additional 2-year extension of Tamiflu shelf life. For more information on this issue contact Delila Bruno at 444-1611.

### ***Q54. Will HHS provide assistance to States for the relabeling process?***

A54. HHS is considering ways for financing the relabeling of Tamiflu in State stockpiles, although no formal decision has been reached. One plan under consideration is usage of FDA-registered relabeling firms (contract relabelers) to relabel Tamiflu bottles for individual State stockpiles.

### ***Q55. Does relabeling need to occur for Tamiflu already delivered into a State's stockpile for states to avail themselves of the 7-year expiry?***

A55. Yes.

**Q56. What date should the two year extension be added on to?**

A56. Two years would be added to the original labeled expiration date for a total maximum expiry of 7 years.

**DPHHS Health Alert Hotline 1-800-701-5769**

**Visit the DPHHS Health Alert Network Website at [www.han.mt.gov](http://www.han.mt.gov)**

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The goal of Montana's Health Alert Network is to transmit information to local public health authorities as quickly as possible, and assign a suitable priority to the message that is sensitive to the impact of a health-related event providing information relative to the public health and safety of Montanans. For questions or comments relative to Montana's HAN system you may contact the DPHHS HAN Coordinator, Gerry Wheat at <<mailto:gwheat@mt.gov>>

**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.

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