HCV CORE SURVEILLANCE
PROJECT - DE

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HCV PROGRAM, DELAWARE

Dormant surveillance program

Impressive saturation of Electronic Lab Reporting

New CDC PHAP
DERSS

Lab reporting system

20-60 reports daily

No standardized system

Out dated surveillance form
NEW CASE DEFINITION

Report

Acute
Confirmed  Probable

Chronic
Confirmed  Probable

Not a Case
Confirmed
BARRIERS TO SURVEILLANCE

- Certainty of Classification
- Number of Cases Completed
- Time Per Case
- Report Completed
- Confirmatory Testing
- Follow-up Needed
- Staff
PARALLEL:

**Economies of Scale**
Spread out fixed costs

**Mass Production**
Standardized process

**Increased Operational Efficiency**
Uniform Product

Ex: Lemonade Stand
Approach: Operational

Challenges
- Data management capacity
- No investigation standard

Objectives
- Assign all labs
- Standardize investigations

Result: Reduced time per case, increased case output, higher quality more uniform data.
INVESTIGATION PROCEDURE

Cases Initiated

| Produced in Batches: | Daily (30-60) | Weekly (200-400) |

Investigate

| Provider Contacted: | Type of Report Received | Format of Request |

Follow-up

| 10 Days for Response: | Contact again | Repeat 3 x maximum |

Close Case
OUTCOMES

• Rapid development and implementation

• Publicly available data in Delaware Journal of Public Health

• Manual for future instruction

• Applied for funding based on current infrastructure
OUTCOMES

Number of Confirmed and Probable Cases Reported in DE, (02/05/2016 – 12/06/2016)

<table>
<thead>
<tr>
<th>HCV Cases</th>
<th>Chronic</th>
<th>Acute</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirmed</td>
<td>777</td>
<td>21</td>
<td>798</td>
</tr>
<tr>
<td>Probable</td>
<td>558</td>
<td>4</td>
<td>562</td>
</tr>
<tr>
<td>Total</td>
<td>1,335</td>
<td>25</td>
<td>1,360</td>
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</tbody>
</table>
OUTCOMES

HCV Case Confirmation Incidence per MMWR Week, (02/05/2016 – 12/06/2016): (N=1673)
OUTCOMES

Age Distribution of Confirmed and Probable, Acute and Chronic HCV Cases, (02/05/2016 – 12/06/2016): (N=1355)
THANK YOU!

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