LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS		
NC REPORTABLE DISEASE/CONDITION		INFECTIOUS AGENT (S)
DENGUE FEVER		DEN-1, DEN-2, DEN-3, and DEN-4, of the genus Flavivirus
PREPARING FOR INVESTIGATION		
KNOW THE DISEASE/CONDITION	 Read about Dengue Fever in the CD Manual. See the case definition for Dengue Fever in the CD Manual. Study APHA Control of Communicable Diseases Manual, 19th ed., pp 164 - 171. Print and review reporting forms: Part 1: Confidential Disease Report (DHHS 2124) Part 2: Dengue Fever (DHHS/EPI #7) 	
CONDUCTING INVESTIGATION		
COLLECT CLINICAL INFORMATION	med othe Obta date Lool supp defii	tient hospitalized for this disease, obtain lical record (admission note, progress note, or lab report(s), and discharge summary). It is in healthcare provider clinical notes from the second second that core evidence in the medical record that corts clinical findings described in the case inition. Travel to an area where dengue is ently occurring is an important factor.
REVIEW LABORATORY INFORMATION APPLY THE CASE DEFINITION	If co days wee Eval requ Furt be in diag illne	iew laboratory report(s) specific to this disease. Invalescent serum is drawn it should be done 6 is or more after onset of illness, but not after 6 its. Ituate laboratory results to determine if direments of the case definition are satisfied. The testing by public health professionals would indicated in high profile cases to confirm the nosis, or to investigate a cluster of dengue-like interesting to the case definition to determine if the clinical
ALLET THE GAGE DEFINITION		laboratory findings meet the case definition

IMPLEMENTING CONTROL MEASURES		
ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE	 Interview client to obtain a travel history for the 2 weeks prior to symptom onset. Travel to an area of active dengue fever is a crucial element of exposure. 	
IMPLEMENT CONTROL MEASURES TO PREVENT DISEASE AND ADDITIONAL EXPOSURES	 Use the CDC website www.cdc.gov to teach at risk people about the disease. Although dengue is not transmitted from person to person, the remote possibility that a mosquito biting an infected person during the viremic state could become infected and transmit dengue to other individuals exists. Persons during acute disease should be protected from mosquito bites. 	
REPORTING INVESTIGATION		
REPORT TO NC COMMUNICABLE DISEASE BRANCH (CD)	 Enter Part 1 and Part 2 Communicable Disease Reports into NC EDSS as a new event, or update the existing event if already entered. Assign event to State Disease Registrar when case investigation complete. 	
CASE FINDING	 During the course of the investigation, look for symptoms of the disease in other exposed individuals with similar travel history. Refer symptomatic individuals to healthcare provider for evaluation. If two or more cases are epidemiologically linked, report as an outbreak of Dengue Fever. If indicated, submit outbreak summary report within 30 days from close of outbreak. 	
SPECIAL CONSIDERATIONS		
STATE LABORATORY OF PUBLIC HEALTH (SLPH) TESTING	 Consider verifying the laboratory test results by sending specimen(s) to the SLPH for reference testing. 	
RISK COMMUNICATION	 NC DHHS Public Information Office (919) 733-9190 is available to assist local health departments as needed. Consider using risk communication tools conservatively. Travel associated cases are not uncommon. 	
ADDITIONAL INFORMATION	 Aspirin is contraindicated due to its hemorrhagic potential. 	