



Influenza and Other Respiratory Virus Surveillance Systems in the Americas



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2014





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Acronyms

ARI Acute respiratory infection

CARPHA Caribbean Public Health Agency

CENETROP Centro de Enfermedades Tropicales (Santa Cruz, Bolivia)

EW Epidemiological Week
ILI Influenza-like illness

INLASA Instituto Nacional de Laboratorios de Salud (La Paz, Bolivia)

INS Instituto Nacional de Salud ORV Other respiratory viruses

SARI Severe acute respiratory infection

SEDES Servicio Departamental de Salud (Bolivia)

ICU Intensive Care Unit

RSV Respiratory Syncytial Virus

Background

Countries of the Americas have been developing surveillance systems to detect novel influenza subtypes and monitor seasonal influenza epidemics for more than ten years. These systems, when functioning optimally, allow public health decision makers to understand when, where, and who is being affected by influenza during seasonal epidemics and should detect the emergence of a novel influenza subtype in a timely manner.

The first surveillance systems to be developed in most countries in the Region were laboratory-based surveillance systems, which would allow the detection of a novel influenza subtype if a clinical sample was collected and tested in the laboratory. Since this time, many other systems have been developed to complement and integrate with the laboratory surveillance platforms, which allow for monitoring of influenza, pneumonia, and clinical influenza proxy syndromes in the ambulatory and hospitalized settings (e.g. influenza-like illness [ILI] and severe acute respiratory infection [SARI]). There are systems which are both indicator-based as well as systems which rely upon event-based information (e.g., tracking of media reports), and these systems are often based upon similar surveillance protocols, such as the PAHO-CDC Generic Protocol for Influenza Surveillance (December 2006). The results of these efforts are a variety of systems, each of which contributes to the regional and global picture of influenza.

This publication represents a compilation of the respiratory virus surveillance systems which exist in countries throughout the Region. These data were obtained directly from the countries and represent an overview of the capacities which currently exist.

Each profile includes information about both epidemiological and laboratory surveillance, focusing on the following areas:

- Influenza/other respiratory virus surveillance systems (sentinel and national)
- Geographical distribution of sentinel surveillance sites (for ILI and SARI) and influenza laboratories
- Characteristics of the sentinel ILI and SARI surveillance systems
- Characteristics of national influenza laboratory capacity
- Information systems and reporting capacity
- Influenza viruses detected by epidemiological week (2010-2014)
- Influenza vaccine use
- Pandemic preparedness plans

Data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology and/or national laboratory coordinators (see Annexes 1 and 2), influenza bulletins published online/distributed by the countries, country presentations in regional influenza meetings, and/or consultation with country influenza surveillance coordinators. Each document was submitted to the corresponding national counterpart for revision. Supplementary demographic data (indicated on the individual sheets) were collected from PAHO's *Heath Situation in the Americas: Basic Indicators*, and/or from country ministry of health data.

Profiles are organized first by sub-region (North to South), then alphabetically, and include all countries who responded in a timely manner to requests for data and approval.







Canada – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **35,525,000** Life expectancy (years)

Men: **79.5**Women: **83.7**Total: **81.6**

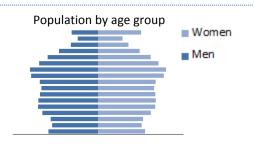
General mortality rate per 1,000 inhabitants

- All causes: **4.0**²

Communicable diseases: 0.18²

Hospital beds per 1,000 inhabitants: 2.7

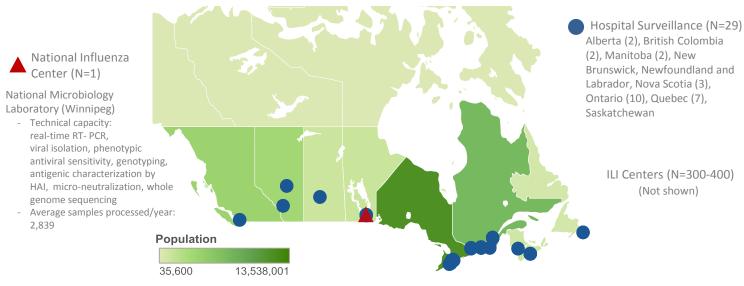
Public health expenditure (% of GDP): 7.7



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
Sentinel Hospital Influenza Surveillance	Sentinel	Yes	Nominal
Influenza-like Illness (ILI) Consultation Rate	Sentinel	No	Aggregate
Influenza Strain Characterizations/Antiviral Resistance	National	Yes	Aggregate
Influenza and Other Respiratory Virus Detections	Sentinel	Yes	Aggregate
Pharmacy Surveillance	National	No	Aggregate
Influenza Outbreak Surveillance	National	Yes	Aggregate
Provincial/Territorial Influenza Hospitalizations and Deaths	National	Yes	Aggregate

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

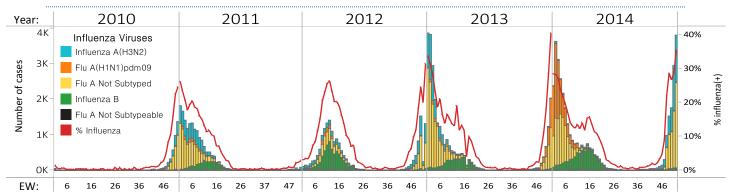
Canada - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance³

Ser	ntinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	No	No
General	Trainings per year	0	0
pling	Selection for sampling	100%	Varies
ı/sam	Systematic randomized sampling	NA	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Case	Frequency of shipment to the laboratory	Immediate	Varies
ement, orting	Frequency of national updates	Immediate	Weekly
Data management, analysis, reporting	Denominator of number of cases	NA	Outpatient visits
Data ı analy	Use of baselines or endemic channels	No	Yes
/uc	Sentinel sites evaluated	No	No
Evaluation/ monitoring	Sentinei sites evaluated	NO	110

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	NA
Samples received from all surveillance systems	No
National weekly average samples processed (2011-2013)	3,034
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014⁴



Vaccines

Vaccine composition	Northern Hemisphere (since 1970)
Vaccination period	Sep-Oct
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	65
Percentage of children (6-59 months) that received the vaccine against influenza, 2012	30

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2011
Year first developed	2006

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

ILI case definition: Acute onset of respiratory illness with fever and cough and with one or more of the following - sore throat, arthralgia, myalgia, or prostration which is likely due to influenza.

⁴ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO*. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





 $^{^{\}rm 1}$ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014. $^{\rm 2}$ 2011

³ SARI case definition: A person admitted to hospital with fever >38 °C and new onset of cough or difficulty breathing, and evidence of severe illness progression, and either admission to the ICU or mechanical ventilation, and no alternate diagnosis within the first 72 hours of hospitalization, and has had exposure to respiratory illness via travel, personal contact, occupation, animal contact, health care, or laboratory.



Mexico - Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **123,799,000** General mortality rate per 1,000 inhabitants

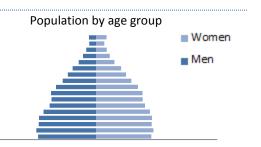
Life expectancy (years) Men: 75.3 Women: 80.0

Total: 77.7

- All causes: 6.0
- Communicable diseases: 0.34

Hospital beds per 1,000 inhabitants: 1.5

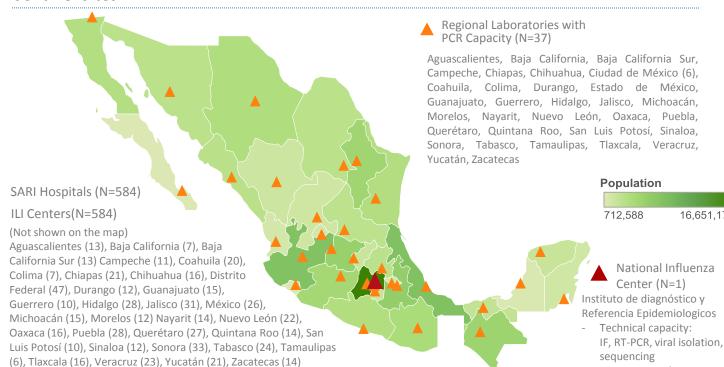
Public health expenditure (% of GDP): 3.2



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
VISVEFLU – SARI Surveillance	Sentinel	Yes	Nominal
VISVEFLU – ILI Surveillance	Sentinel	Yes	Nominal
Pneumonia Surveillance	National	No	Aggregate
ARI Surveillance	National	No	Aggregate
Mortality Surveillance	National	Yes	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	Yes (internal use only)

Reporting

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

16,651,171

Average samples processed/year: 16,328

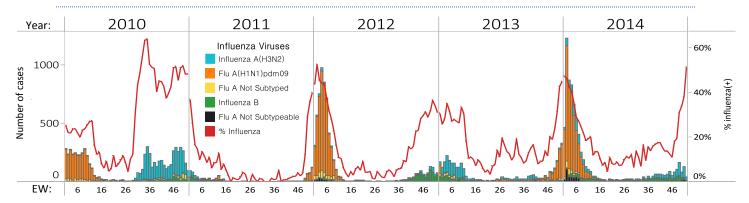
Mexico - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	No	No
General	Trainings per year	1	1
pling	Selection for sampling	100%	10%
ı/sam	Systematic randomized sampling	NA	Yes
selection	Selection for sampling 100% Systematic randomized sampling NA Collection of clinical-epidemiological variables Frequency of shipment to the laboratory 1-2/we		Yes
Case			1-2/week
ement, orting	Frequency of national updates	Daily	Daily
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	Outpatient visits
Data r analy	Use of baselines or endemic channels	Pneumonia	ARI
\ ~			
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	1957
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	314
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014³



Vaccines

Vaccine composition Northern Hemisphere (since 2004) Vaccination period Oct-Dec, Jan-Feb Percentage of older adults (>50 years) that received the vaccine against influenza, 2012 Percentage of children (6-35 months) that received the vaccine against influenza, 2012

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2009
Year first developed	2007

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

ILI case definition: Person of any age that presents or refers to having had fever ≥ 38 °C, cough and headache, accompanied by one or more of the following signs or symptoms: rhinorrhea, coryza, arthralgia, myalgia, prostration, odynophagia, thoracic pain, abdominal pain, nasal congestion or diarrhea





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Person of any age that presents difficulty breathing, with background of fever ≥38 °C and cough, with one or more of the following symptoms: general malaise, thoracic pain, polypnea



United States of America – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: 322,583,000 Life expectancy (years)

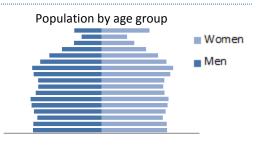
Men: 76.7 Women: 81.4 Total: 79.1

General mortality rate per 1,000 inhabitants

- All causes: 4.82
- Communicable diseases: 0.232

Hospital beds per 1,000 inhabitants: 2.9

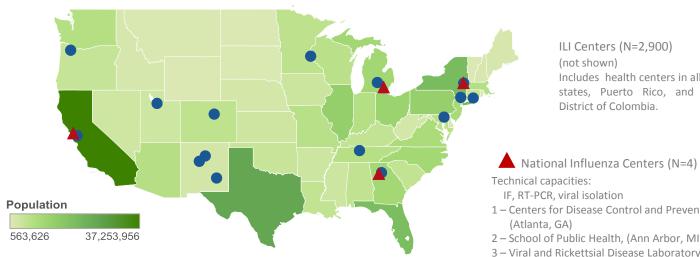
Public health expenditure (% of GDP): 8.3



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
Virologic Surveillance	Sentinel	Yes	Nominal
Outpatient Illness Surveillance (ILI Surveillance)	Sentinel	Yes	Nominal
Mortality Surveillance	Sentinel	No	Aggregate
Hospitalization Surveillance	Sentinel	Yes	Nominal
Summary of the Geographic Spread of Influenza	National	No	Aggregate

Sentinel Sites



ILI Centers (N=2,900)

(not shown)

Includes health centers in all 50 states, Puerto Rico, and the District of Colombia.

- 1 Centers for Disease Control and Prevention (Atlanta, GA)
- 2 School of Public Health, (Ann Arbor, MI)
- 3 Viral and Rickettsial Disease Laboratory (Richmond, CA)
- 4 Virology Diagnostic Services Laboratory of Zoonotic Diseases and Virology Proficiency Testing (Slingerlands, NY)

Hospitalization Surveillance Hospitals (N>240)

California (3 counties); Connecticut (2 counties); Georgia (8 counties); Maryland (6 counties/cities); Michigan (4 counties); Minnesota (7 counties); New Mexico (7 counties); New York (15 counties); Oregon (3 counties); Tennessee (8 counties); Ohio (10 counties); and Utah (1 county)

Information Systems

Integrates epidemiological and virologic information	Partial
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	Yes

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

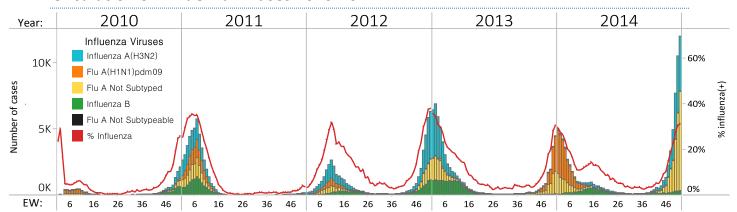
United States of America – Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance³

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	No	No
Gen	PAHO/WHO case definition Trainings per year		Varies by state
pling	Selection for sampling	~30%	Varies by state
ı/sam	Systematic randomized sampling	No	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Case	Frequency of shipment to the laboratory	Weekly	Varies by state
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Catchment population	Outpatient visits
Data r analy:	Use of baselines or endemic channels	No	Yes
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
Evalu monii	Evaluations per year	1	Varies by state

Laboratory Surveillance	
National Influenza Center (year established as a NIC)	Atlanta (1956) Ann Arbor Richmond Slingerlands
Samples received from all surveillance systems	No
National weekly average samples processed (2011-2013)	5736
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-20144



Vaccines

Vaccine composition	Northern Hemisphere (since 1940)
Vaccination period	Jul-Apr
Percentage of older adults (≥50 years) that received the vaccine against influenza, 2012	65
Percentage of children (>6 months) that received the vaccine against influenza, 2012	52

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2006
Year first developed	2005

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

⁴ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO*. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² 2011

 $^{^3}$ Hospitalized Influenza case definition: Laboratory confirmed influenza-associated hospitalizations in children and adults

ILI case definition: fever (temperature of 100 °F [37.8 °C] or greater) and a cough and/or a sore throat without a KNOWN cause other than influenza







Belize - Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: 340,000 Life expectancy (years)

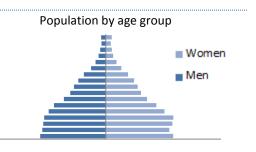
Men: **71.1** Women: 77.3 Total: **74.1**

General mortality rate per 1,000 inhabitants

- All causes: 7.5
- Communicable diseases: .97

Hospital beds per 1,000 inhabitants: 0.9

Public health expenditure (% of GDP): 5.7²



Surveillance Systems

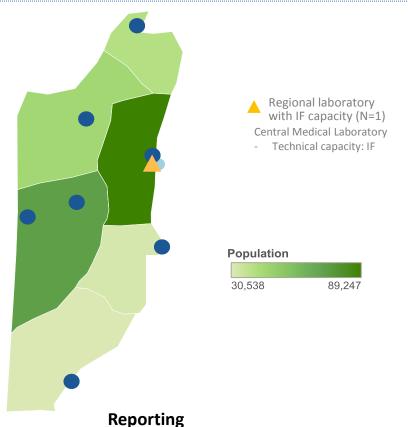
Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
ILI Surveillance	Sentinel	Yes	Nominal

Sentinel Sites³

SARI Hospitals (N=7)

Corozal (Corozal Community Hospital), Orange Walk (Northern Regional Hospital), Belize City (Karl Heusner Memorial Hospital), Cayo (San Ignacio Hospital, Western Regional Hospital), Stann Creek (Southern Regional Hospital), Punta Gorda (Punta Gorda Hospital)

ILI Centers (N=1) Cleopatra White Polyclinic (Belize City)



Information Systems

Yes
Yes
Yes
Yes
No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes ³

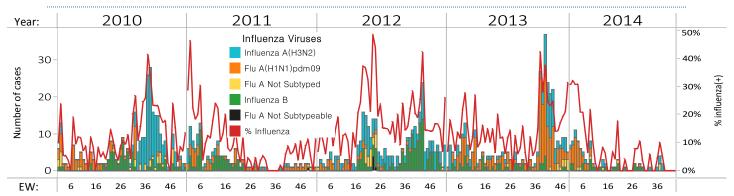
Belize - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance⁴

Sen	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	No	No
Gen	Trainings per year	1	1
pling	Selection for sampling	Based on # of cases	Based on # of cases
ı/sam	Systematic randomized sampling	Yes	Yes
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Case	Frequency of shipment to the laboratory	As available (daily)	As available (daily)
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	(under revision)	(under revision)
Data r analy.	Use of baselines or endemic channels	No	No
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
	Evaluations per year	Monthly	Monthly

Laboratory Surveillance	
National Influenza Center (NIC)	No ³
Year established as NIC	NA
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	NA
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes ³
Detection of other respiratory viruses by PCR	Yes ³
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014⁵



Vaccines

Vaccine composition	Northern Hemisphere (since 2008)
Vaccination period	Oct-Nov
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	20
Percentage of children (6-23 months) that received the vaccine against influenza, 2012	98

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	Ongoing
Year first developed	2006

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

SARI case definition for children under 5 years old: Meets the case definition as above OR any child under 5 years old clinically suspected of having pneumonia or severe/very severe Pneumonia and requiring hospital admission.

ILI case definition: sudden onset of a fever over 38 $^{\circ}$ C, or a self reported history of fever, AND cough or sore throat, in the absence of other diagnoses with onset within the last seven days

⁵ Aggregate results from CARPHA laboratory. Source: Pan American Health Organization. Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





 $^{^{1}}$ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² 2011

³ Sentinel hospitals in Belize send samples to the CARPHA (Caribbean Public Health Agency) laboratory, a NIC.

⁴ SARI case definition for persons over 5 years old: Sudden onset of fever over 38 °C, AND Cough or sore throat, AND Shortness of breath or difficulty breathing, with onset within the last seven days AND Requiring hospital admission.



Costa Rica - Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: 4,938,000 Life expectancy (years)

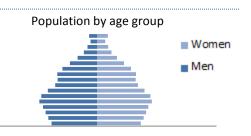
Men: 78.0 Women: 82.4 Total: 80.1

General mortality rate per 1,000 inhabitants

- All causes: 4.4
- Communicable diseases: 0.20

Hospital beds per 1,000 inhabitants: 1.1

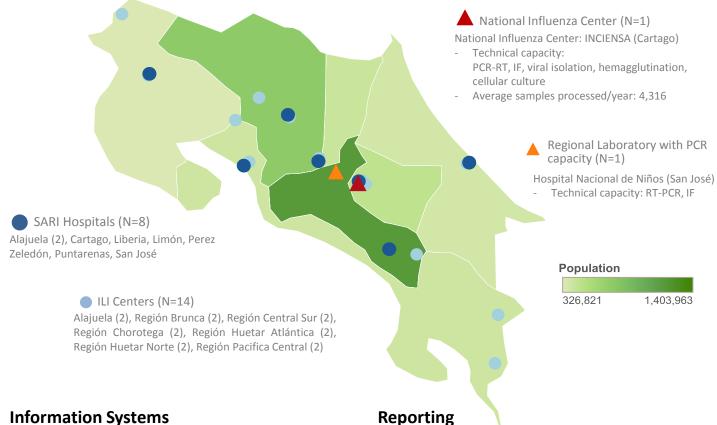
Public health expenditure (% of GDP): 7.6



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
Sentinel ILI Surveillance	Sentinel	Yes	Nominal
Sentinel and Intensified SARI Surveillance	Sentinel	Yes	Nominal
Routine Surveillances: SARI; ILI; SARI (manditory notification)	National	In some cases	Nominal, aggregate
Unusual SARI case surveillance	National	Yes	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	No
Generates influenza activity indicators	No
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	No
Bulletins/reports include sentinel surveillance data	NA
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

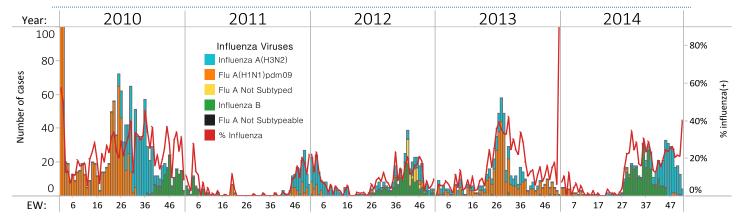
Costa Rica - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	No	No
General	Trainings per year	2-3	2-3
pling	Selection for sampling	Quota 5/site	Quota 5/site
ı/sam	Systematic randomized sampling	No	No
Case selection/sampling	Collection of clinical-epidemiological variables	Weekly	Weekly
Case	Frequency of shipment to the laboratory	Weekly	Weekly
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	NA
Data ı analy	Use of baselines or endemic channels	No	No
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
Evalu. monit	Evaluations per year	3	3

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	2006
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	83
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	No
Plan for quality control	No

Circulation of Influenza Viruses 2010-2014³



Vaccines

Vaccine composition	Northern Hemisphere (since 2004)
Vaccination period	Feb
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	98
Percentage of children (<10 years) that received the vaccine against influenza, 2012	NA

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	Under review
Year first developed	NA

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

ILI case definition: An acute respiratory infection (ARI) that presents fever or history of fever ≥38 °C and cough and with onset of symptoms in the last 10 days

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO*. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: An acute respiratory infection (ARI) that presents fever or history of fever ≥38 °C and cough and with onset of symptoms in the last 10 days, that fulfills hospitalization requirements



El Salvador – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **6,384,000** Life expectancy (years)

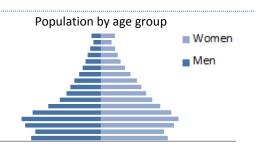
- Men: **68.0** - Women: **77.3** - Total: **72.8** General mortality rate per 1,000 inhabitants

- All causes: 7.3

- Communicable diseases: 0.70

Hospital beds per 1,000 inhabitants: 1.1

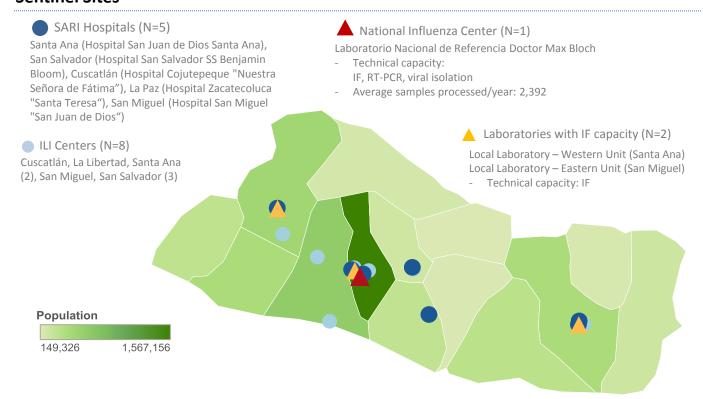
Public health expenditure (% of GDP): 4.2



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
ILI Surveillance	Sentinel	Yes	Nominal
Pneumonia Mortality Surveillance	National	Yes	Nominal
Pneumonia and Acute Respiratory Infection Surveillance	National	No	Aggregate
Hospitalized Pneumonia Surveillance	National	No	Nominal
Hospitalized Unusual SARI Surveillance	National	Yes	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	Yes (internal use only)

Bulletins/reports generated automatically	Yes
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	Yes
Data reported to FluNet (PAHO/WHO)	Yes

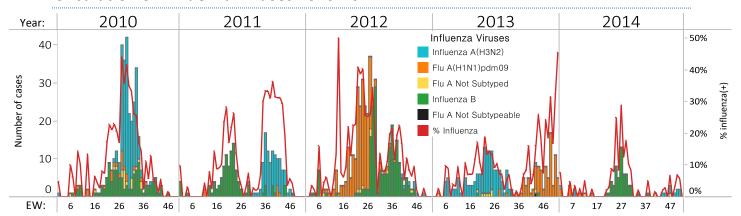
El Salvador - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	No	No
Gen	Trainings per year	2	2
pling	Selection for sampling	Quota 5/site	Quota 3/site
n/sam	Systematic randomized sampling	No	No
selectio	Selection for sampling Systematic randomized sampling Collection of clinical-epidemiological variables Frequency of shipment to		Yes
Case	Frequency of shipment to the laboratory	Weekly	Weekly
ement, orting	Frequency of national updates	Weekly	Weekly
nanage sis, rep	Pata management, analysis, reporting analysis, reporting analysis. Denominator of number of cases Use of baselines or endemic channels		Outpatient visits
Operation of the second of the		Yes	No
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
Evalu moni	Evaluations per year	1	1

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	2005
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	46
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	No
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014³



Vaccines

Vaccine composition	Southern Hemisphere (since 2004)
Vaccination period	May-Sep
Percentage of older adults (≥60 years) that received the vaccine against influenza, 2010	89
Percentage of children (6-59 months) that received the vaccine against influenza, 2010	87

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2013
Year first developed	2009

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

³ Source: Pan American Health Organization. Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Any patient of any age with history of sudden fever greater than 38 °C, cough or sore throat, dyspnea (difficulty breathing), and need for hospitalization ILI case definition: Any patient of any age with history of sudden fever greater than 38 °C, cough or sore throat and the absence of another diagnosis



Honduras – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **8,261,000** Life expectancy (years)

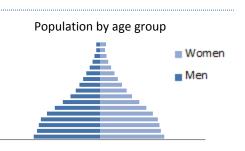
Men: 71.9Women: 76.5Total: 74.1

General mortality rate per 1,000 inhabitants

- All causes: 6.9
- Communicable diseases: 0.9

Hospital beds per 1,000 inhabitants: 0.7

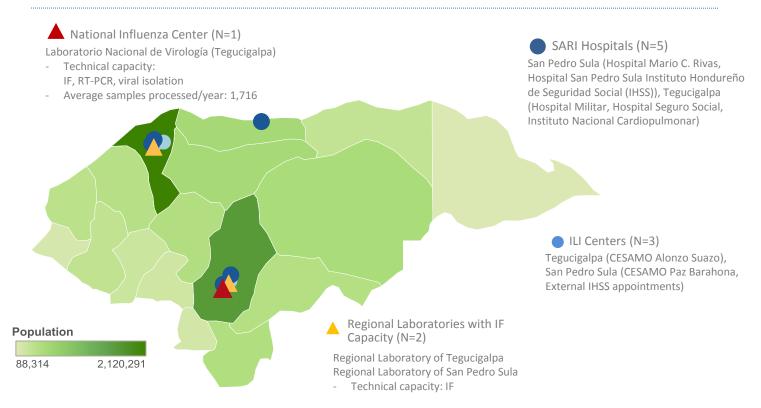
Public health expenditure (% of GDP): 4.3



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
ILI Surveillance	Sentinel	Yes	Nominal
SARI Mortality Surveillance	Sentinel	Yes	Nominal
Pneumonia Surveillance	National	No	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	Yes
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

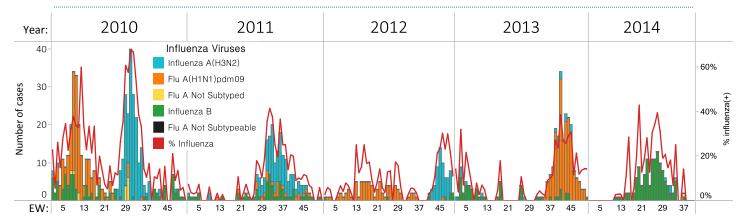
Honduras - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	Yes (2009)	No
General	Trainings per year	3	2-3
pling	Selection for sampling	100%	Quota 3/site
ı/sam	Systematic randomized sampling	NA	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Case	Frequency of shipment to the laboratory	Weekly	Weekly
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	Outpatient visits
Data ı analy	Use of baselines or endemic channels	No	No
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
Evalu moni	Evaluations per year	2	2

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	2005
Samples received from all surveillance systems	No
National weekly average samples processed (2011-2013)	33
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	No
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-20143



Vaccines

Influenza Pandemic Preparedness Plan

Vaccine composition	Northern Hemisphere (since 2003)
Vaccination period	Dec
Percentage of older adults (>60 years) that received the vaccine against influenza, 2012	73
Percentage of children (6 months – 9 years) that received the vaccine against influenza, 2010	45

National Pandemic Preparedness Plan	Yes
Year last updated	2013
Year first developed	2013

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





 $^{^{1}}$ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Fever measured ≥38 °C or history of fever, cough and difficulty breathing (dyspnea)

ILI case definition: Fever measured ≥38 °C or history of fever, cough or sore throat and absence of other causes



Nicaragua – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **6,169,000** Life expectancy (years)

- Men: **75.0** - Women: **78.2**

Total: **75.2**

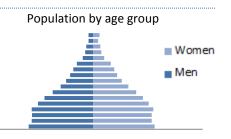
General mortality rate per 1,000 inhabitants

- All causes: **6.5**

- Communicable diseases: 0.41

Hospital beds per 1,000 inhabitants: 0.9

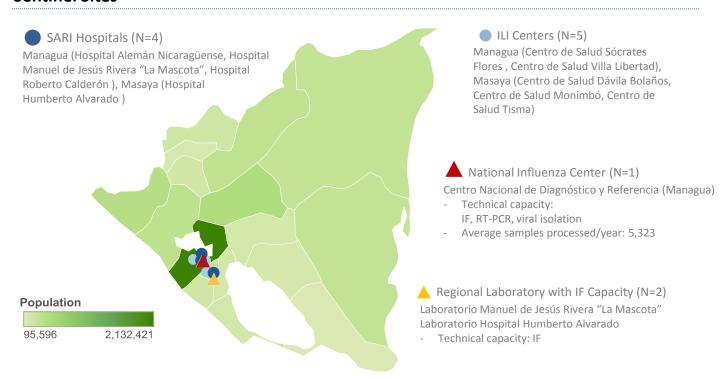
Public health expenditure (% of GDP): 4.5



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
ILI Surveillance	Sentinel	Yes	Nominal
Pneumonia Surveillance	Sentinel <5 years	Yes	Aggregate
ARI Surveillance	National	No	Aggregate
Unusual Respiratory Event Surveillance	National	Yes	Nominal
Mortality Surveillance	National	Yes	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	No
Generates influenza activity indicators	No
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	No
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

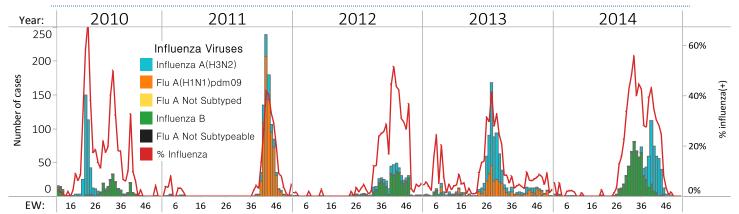
Nicaragua - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Ser	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	No	No
Gen	Trainings per year	1	1
pling	Selection for sampling	Quota, 100%	Quota 3/site
n/sam	Systematic randomized sampling	No	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Саѕь	Frequency of shipment to the laboratory	Weekly	Daily
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	NA	NA
Data ı analy	Use of baselines or endemic channels	No	No
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
ati tor			

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	2009
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	102
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014³



Vaccines

Vaccine composition	Southern Hemisphere (since 2007)
Vaccination period	Apr – May
Percentage of older adults (>50 years) that received the vaccine against influenza, 2007	78
Percentage of children (6-23 months) that received the vaccine against influenza, 2012	100

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2012
Year first developed	2009

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

fever, cough or sore throat, and absence of other diagnosis





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Any patient of any age with history of sudden fever >38 °C or history of fever, cough, or sore throat, dyspnea, and need for hospitalization ILI case definition: Any patient of any age with history of sudden fever or background of

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp



Panama – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)1

Total population: **3,926,000** Life expectancy (years)

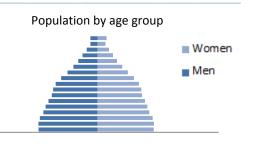
Men: **75.0**Women: **80.7**Total: **77.8**

General mortality rate per 1,000 inhabitants

- All causes: 5.8
- Communicable diseases: 0.64

Hospital beds per 1,000 inhabitants: 2.3

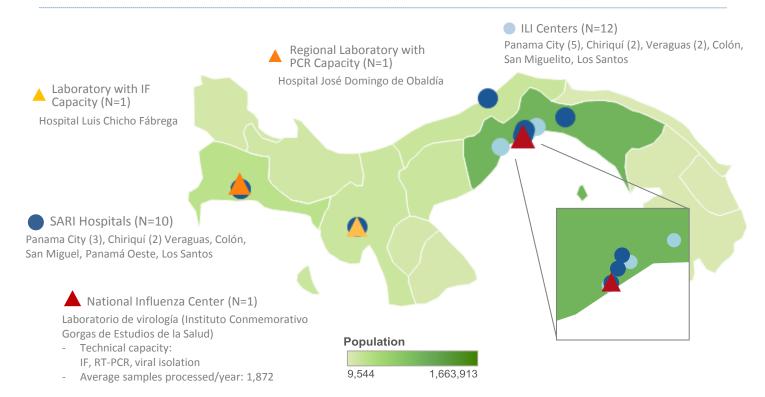
Public health expenditure (% of GDP): 5.2



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
National Intensified SARI Surveillance	National	Yes	Nominal
Sentinel SARI Surveillance	Sentinel	Yes	Nominal
Sentinel ILI Surveillance	Sentinel	Yes	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

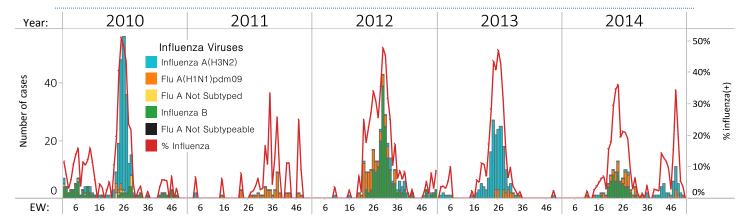
Panama - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	Yes (protocol)	Yes (protocol)
General	Trainings per year	1	1
pling	Selection for sampling	No	No
ı/sam	Systematic randomized sampling	No	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Case	Frequency of shipment to the laboratory	Daily/ weekly	Daily/ weekly
ement, orting	Frequency of national updates	Daily	Daily
Data management, analysis, reporting	Denominator of number of cases	Total samples	Total samples
Data r analy	Use of baselines or endemic channels	Yes	Yes
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
7 1	Evaluations per year	1	1

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	2007
Samples received from all surveillance systems	No
National weekly average samples processed (2011-2013)	36
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014³



Vaccines

Vaccine composition	Southern Hemisphere (since 2005)
Vaccination period	NA
Percentage of older adults (>60 years) that received the vaccine against influenza, 2012	69
Percentage of children (6 months to <5 years) that	83

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2009
Year first developed	2009

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO*. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





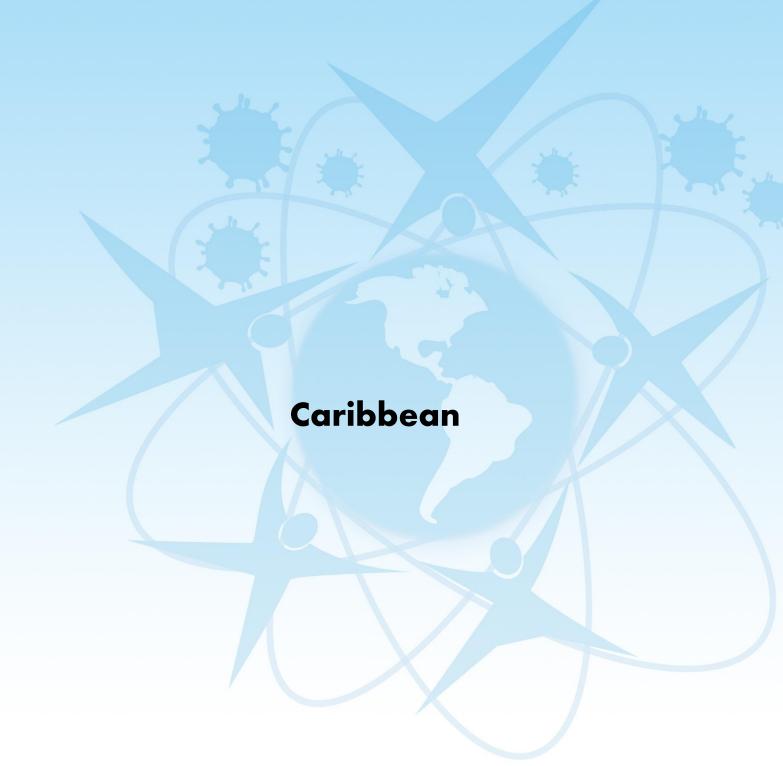
¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Patient with sudden fever >38 °C and cough or sore throat and dyspnea (difficulty breathing) and need for hospitalization

ILI case definition: Patient with sudden fever >38 °C and cough or sore throat, and absence

ILI case definition: Patient with sudden fever >38 °C and cough or sore throat, and absence of other diagnosis







Barbados - Influenza and Other Respiratory Virus (ORV) Surveillance (2014 edition)

Sociodemographic indicators (2014)¹

Total population: 290,000 Life expectancy (years)

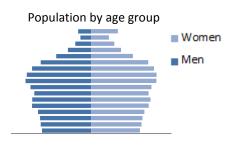
Men: 72.6 Women: 77.4 Total: **75.0**

General mortality rate per 1,000 inhabitants

- All causes: 6.52
- Communicable diseases: 0.702

Hospital beds per 1,000 inhabitants: 6.2

Public health expenditure (% of GDP): 4.1



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
Epidemiological Surveillance	National	No	Aggregate
Syndromic Surveillance	National	No	Aggregate

Sentinel Sites³

Regional laboratory with IF capacity (N=1)

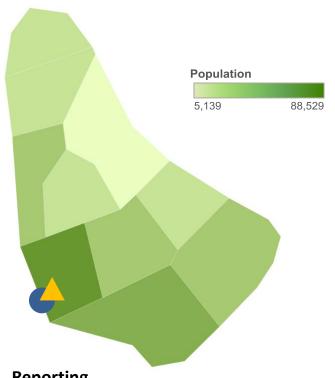
National Public Health Laboratory

- Technical capacity: IF
- Average samples processed/year: 530



SARI Hospital (N=1)

Bridgetown: Queen Elizabeth Hospital (general hospital)



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	No
Allows for monitoring of the sentinel site system	Partial
Generates influenza activity indicators	Partial
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes ³

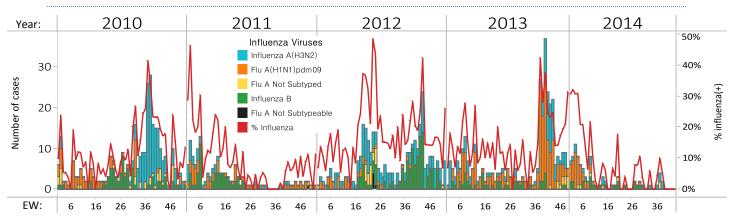
Barbados - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance⁴

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	Yes	NA
General	Trainings per year	1	NA
pling	Selection for sampling	Varies	NA
ı/sam	Systematic randomized sampling	No	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Algorithm	NA
Case	Frequency of shipment to the laboratory	Daily	NA
ment, orting	Frequency of national updates	Weekly	NA
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions or visits	NA
Data ı analy	Use of baselines or endemic channels	Yes	NA
Evaluation/ monitoring	Sentinel sites evaluated	Yes	NA
Evalu moni	Evaluations per year	<1	NA

Laboratory Surveillance	
National Influenza Center (NIC)	No
Year established as NIC	NA
Samples received from all surveillance systems	NA
National weekly average samples processed (2011-2013)	10.2
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes ³
Detection of other respiratory viruses by PCR	Yes ³
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014⁵



Vaccines

Vaccine composition	Northern Hemisphere
Vaccination period	Sep-Dec
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	NA
Percentage of children (6-23 months) that received the vaccine against influenza, 2012	NA

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2009
Year first developed	2006

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

⁵ Aggregate results from CARPHA laboratory. Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² 2011

³ Sentinel hospitals in Barbados send samples to the CARPHA (Caribbean Public Health Agency) laboratory, a NIC.

⁴ SARI case definition: Acute respiratory infection with history of fever or measured fever of ≥38 °C and cough, with onset in the last 10 days, and that requires hospitalization



Dominica - Influenza and Other Respiratory Virus (ORV) Surveillance (2014 edition)

Sociodemographic indicators (2014)¹

Total population: 73,000 Life expectancy (years)

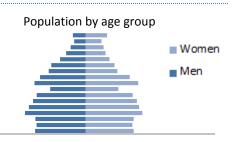
Men: 73.6 Women: **79.7** Total: 76.6

General mortality rate per 1,000 inhabitants

- All causes: 6.7
- Communicable diseases: 0.45

Hospital beds per 1,000 inhabitants: 3.8

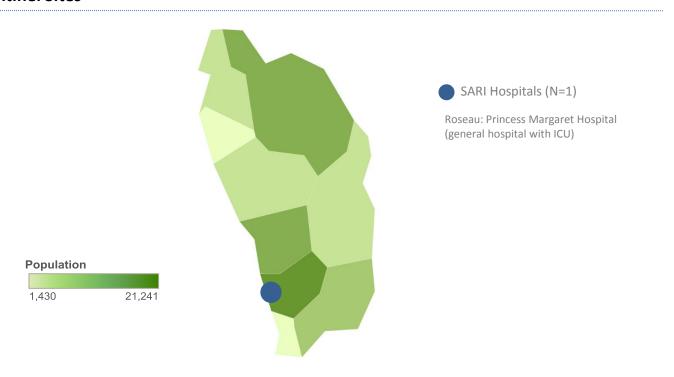
Public health expenditure (% of GDP): 4.2



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
Communicable Disease Surveillance (includes ILI)	National	No	Aggregate

Sentinel Sites²



Information Systems

Integrates epidemiological and virologic information	No
Integrates different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes ²

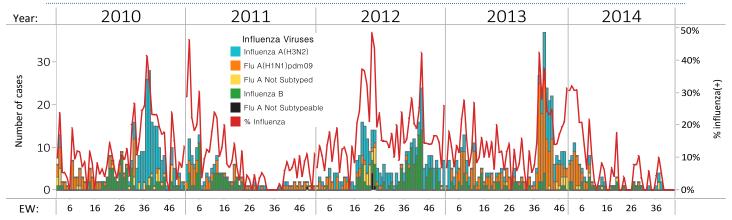
Dominica - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance³

Sen	ntinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	Yes	Yes
Gen	Trainings per year	<1	<1
pling	Selection for sampling	100%	<20%
n/sam	Systematic randomized sampling	NA	Yes
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	NA
Case	Frequency of shipment to the laboratory		Twice weekly
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	Outpatient visits
Data r analy.	Use of baselines or endemic channels	Yes	Yes
Evaluation/ monitoring	Sentinel sites evaluated	NA	NA
Evalu moni	Evaluations per year	NA	NA

Laboratory Surveillance	
National Influenza Center (NIC)	No
Year established as NIC	NA
Samples received from all surveillance systems	No
National weekly average samples processed (2011-2013)	NA
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes ²
Detection of other respiratory viruses by PCR	Yes ²
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-20144



Vaccines

Influenza Pandemic Preparedness Plan

Vaccine composition	Northern Hemisphere
Vaccination period	Nov-May
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2009	76
Percentage of children (5 months-5 years) that received the vaccine against influenza, 2009	51

National Pandemic Preparedness Plan	Yes
Year last updated	2014
Year first developed	2005

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² Sentinel hospitals in Dominica send samples to the CARPHA (Caribbean Public Health Agency) laboratory, a NIC.

⁴ Aggregate results from CARPHA laboratory. Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





³ SARI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days that requires hospitalization

ILI case definition: An acute respiratory infection with history of fever or measured fever of

≥38 °C and cough with onset within the last 10 days

World He



Dominican Republic – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **10,529,000** Life expectancy (years)

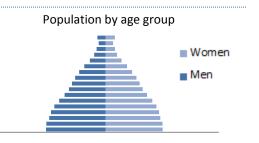
Men: 70.6Women: 76.9Total: 73.6

General mortality rate per 1,000 inhabitants

- All causes: 7.0²
- Communicable diseases: **0.60**²

Hospital beds per 1,000 inhabitants: 1.6

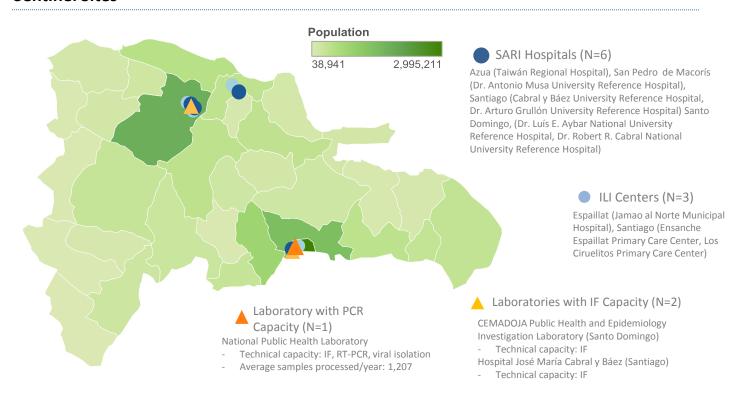
Public health expenditure (% of GDP): 2.8



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
ILI Surveillance	Sentinel	Yes	Nominal
Upper ARI Surveillance	National	No	Aggregate
Lower ARI Surveillance	National	No	Aggregate

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	Yes (internal use only)

Bulletins/reports generated automatically	Yes
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

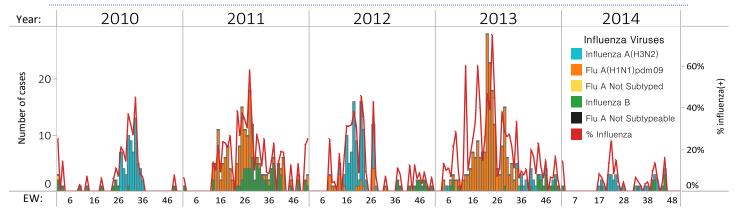
Dominican Republic - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance³

Ser	ntinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	No	No
Gen	Trainings per year	2	1
pling	Selection for sampling	100%	Quota 5/week
n/sam	Systematic randomized sampling	NA	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
se	Function of altitude and the	4 2 .: /	
Ca	Frequency of shipment to the laboratory	1-2 times/ week	Weekly
	. , .		Weekly
	the laboratory	week	<u> </u>
Data management, analysis, reporting	Frequency of national updates	week	Weekly
	Frequency of national updates Denominator of number of cases	week Daily NA	Weekly NA

Laboratory Surveillance	
National Influenza Center (NIC)	No
Year established as NIC	NA
Samples received from all surveillance systems	No
National weekly average samples processed (2011-2013)	21
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014⁴



Vaccines

Vaccine composition	Northern Hemisphere (since 2006)
Vaccination period	Sep-Nov
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2008	83
Percentage of children (6 months – 3 years) that received the vaccine against influenza, 2012	

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2011
Year first developed	2008

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

ILL case definition: Patient of any age with history of sudden fever over 38°C and cough or sore throat and absence of other diagnosis

⁴ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO*. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² 2011

³ SARI case definition: If over 5 years: fever of 38°C or history of fever, cough or sore throat, difficulty breathing and need for hospitalization. If under 5 years: severe feverish acute respiratory illness that requires hospitalization, including clinical suspicion of pneumonia



Haiti - Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **10,461,000** Life expectancy (years)

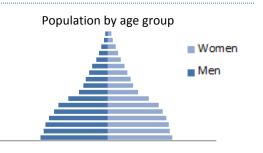
Men: 61.5Women: 65.3Total: 63.4

General mortality rate per 1,000 inhabitants

- All causes: NA
- Communicable diseases: NA

Hospital beds per 1,000 inhabitants: 0.7

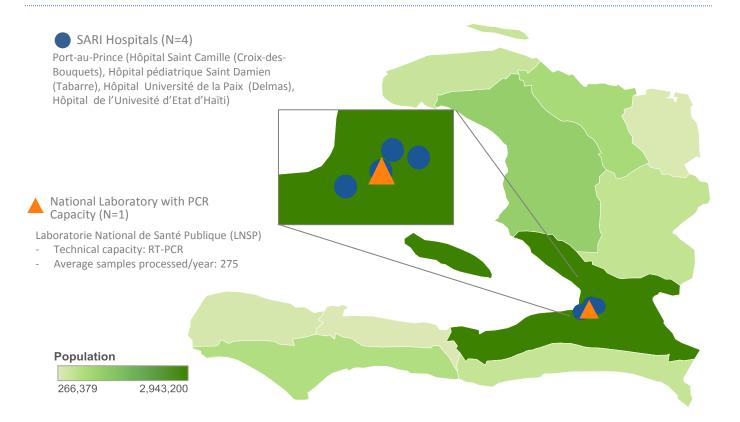
Public health expenditure (% of GDP): 0.7



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	No
Generates interactive online dashboard	No

Bulletins/reports generated automatically	Yes
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

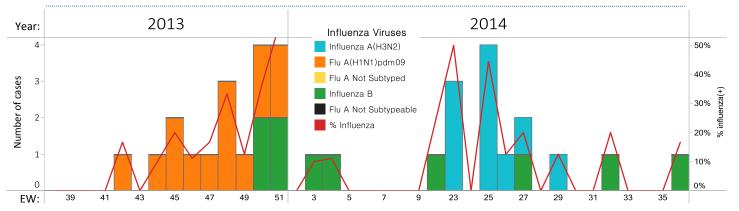
Haiti - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	Yes	NA
Gen	Trainings per year	1	NA
pling	Selection for sampling	Quota 12/site	NA
n/sam	Systematic randomized sampling	No	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	NA
Case	Frequency of shipment to the laboratory	Daily, 2-3 times/week	NA
	the laboratory	times, week	
ement, orting	Frequency of national updates	Weekly	NA
management, sis, reporting	•	·	NA NA
Data management, analysis, reporting	Frequency of national updates	Weekly	
Evaluation/ Data management, monitoring analysis, reporting	Frequency of national updates Denominator of number of cases	Weekly	NA

Laboratory Surveillance	
National Influenza Center (NIC)	No
Year established as NIC	NA
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	5
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	No
Plan for quality control	Yes

Circulation of Influenza Viruses 2013-2014³



Vaccines

Influenza vaccine not yet introduced in the public sphere

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2013
Year first developed	2009

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: An acute respiratory infection with history of fever or measured fever of ≥ 38°C and cough with onset within the last 10 days that requires hospitalization



Jamaica – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **2,799,000** Life expectancy (years)

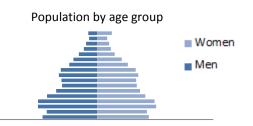
Men: 71.2Women: 76.2Total: 73.7

General mortality rate per 1,000 inhabitants

- All causes: NA
- Communicable diseases: NA

Hospital beds per 1,000 inhabitants: 1.7

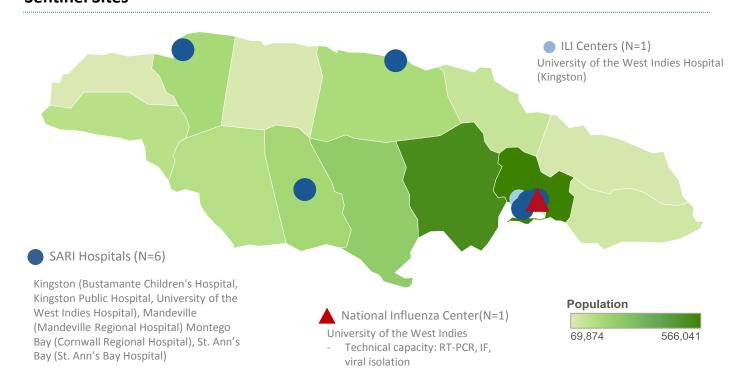
Public health expenditure (% of GDP): 3.3



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
ARI/ILI Surveillance	Sentinel	Yes	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information Integrates different surveillance information systems Allows for monitoring of the sentinel site system	[system pending update underway]
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	NA
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

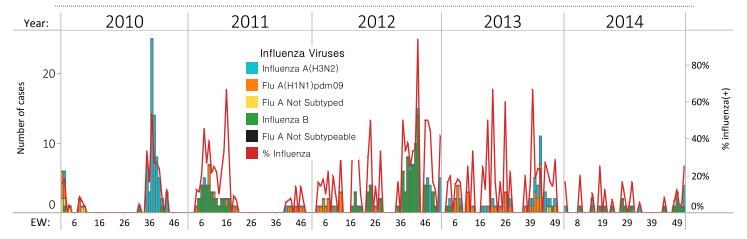
Jamaica - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI/ARI
eral	PAHO/WHO case definition	Yes	Yes (ILI)
General	Trainings per year	1	<1
pling	Selection for sampling	Quota 5/week	Quota 5/week
ı/sam	Systematic randomized sampling	No	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	No
Case	Frequency of shipment to the laboratory	Daily	Varies
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	Outpatient visits
	Use of baselines or endemic channels	Yes	No
Evaluation/ monitoring	Sentinel sites evaluated	No	No
Evalu moni	Evaluations per year	NA	NA

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	1952
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	8
Access to epidemiological case information	No
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	No
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014³



Vaccines

Vaccine composition	Northern Hemisphere (since 2006)
Vaccination period	Oct-Jan
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	NA
Percentage of children (6-24 months) that received the vaccine against influenza, 2012	l NA

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2009
Year first developed	2007

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days that requires hospitalization ILI/ARI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days



Saint Lucia – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2012)¹

Total population: **169,115** Life expectancy (years)

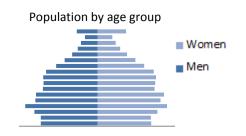
Men: 72.7Women: 77.5Total: 75.1

General mortality rate per 1,000 inhabitants

- All causes: 6.9
- Communicable diseases: 0.44

Hospital beds per 1,000 inhabitants: 1.5

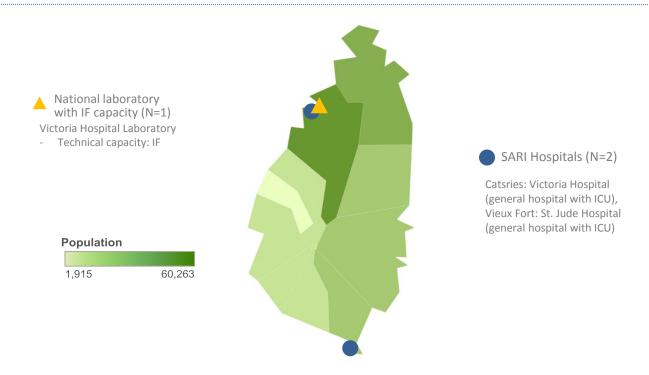
Public health expenditure (% of GDP): 1.59



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
Syndromic Surveillance (includes ARI/ILI)	National	No	Aggregate

Sentinel Sites²



Information Systems

Integrates epidemiological and virologic information	No
Integrates different surveillance information systems	No
Allows for monitoring of the sentinel site system	No
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	No
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes ²

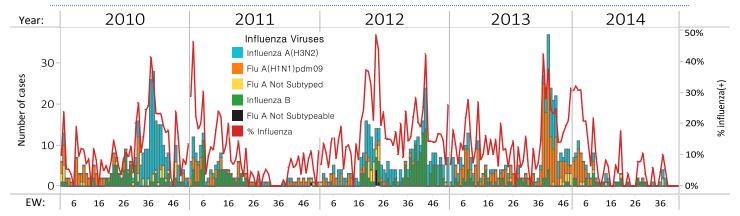
Saint Lucia - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance³

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	Yes	NA
General	Trainings per year	<1	NA
pling	Selection for sampling	100%	NA
ı/sam	Systematic randomized sampling	NA	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	NA
Case	Frequency of shipment to the laboratory	As required	NA
Data management, analysis, reporting	Frequency of national updates	NA	NA
	Denominator of number of cases	NA	NA
	Use of baselines or endemic channels	No	NA
Evaluation/ monitoring	Sentinel sites evaluated	No	NA

Laboratory Surveillance	
National Influenza Center (NIC)	No
Year established as NIC	NA
Samples received from all surveillance systems	No
National weekly average samples processed (2011-2013)	NA
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes ²
Detection of other respiratory viruses by PCR	Yes ²
Plan for quality control	NA

Circulation of Influenza Viruses 2010-2014⁴



Vaccines

Influenza Pandemic Preparedness Plan

Vaccine composition	Northern Hemisphere (since 2006)
Vaccination period	NA
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	NA
Percentage of children (6-24 months) that received the vaccine against influenza, 2012	i NA

National Pandemic Preparedness Plan	Yes
Year last updated	2010
Year first developed	NA

⁴ Aggregate results from CARPHA laboratory. Source: Pan American Health Organization. Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Saint Lucia Ministry of Health: Basic Indicators, 2012

² Sentinel hospitals in Saint Lucia send samples to the CARPHA (Caribbean Public Health Agency) laboratory, a NIC.

³ SARI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days that requires hospitalization ILI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days

Pan American

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Saint Vincent and the Grenadines – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **103,000** Life expectancy (years)

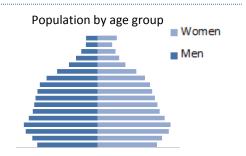
Men: 72.7Women: 76.6Total: 74.6

General mortality rate per 1,000 inhabitants

- All causes: 8.5
- Communicable diseases: 0.82

Hospital beds per 1,000 inhabitants: **5.2**

Public health expenditure (% of GDP): NA



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
Communicable Disease Surviellance (includes ILI)	National	Yes	Aggregate

Sentinel Sites²











Information Systems

Integrates epidemiological and virologic information	No ³
Integrates different surveillance information systems	No ³
Allows for monitoring of the sentinel site system	No
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No ³
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes ²

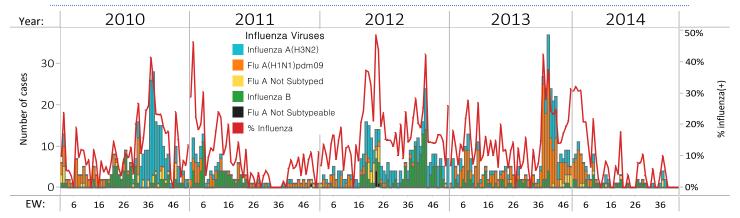
Saint Vincent and the Grenadines - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance⁴

Ser	ntinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	Yes	NA
Gen	Trainings per year	<1	NA
pling	Selection for sampling	100%	NA
n/sam	Systematic randomized sampling	NA	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	NA
Саѕь	Frequency of shipment to the laboratory	As required, daily	NA
ement, orting	Frequency of national updates	Weekly	NA
anage s, rep	Denominator of number of cases	NA	NA
n Sį			
Data management, analysis, reporting	Use of baselines or endemic channels	No	NA
Evaluation/ Data mo monitoring analysis	Use of baselines or endemic channels Sentinel sites evaluated	No No	NA NA

Laboratory Surveillance	
National Influenza Center (NIC)	No
Year established as NIC	NA
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	NA
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes ³
Detection of other respiratory viruses by PCR	Yes ³
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014 5



Vaccines

Influenza Pandemic Preparedness Plan

Influenza vaccine not yet introduced in the public sphere

National Pandemic Preparedness Plan

Yes

Year last updated

2009

Year first developed

2006

- ¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.
- ² Sentinel hospitals in Saint Vincent and the Grenadines send samples to the CARPHA (Caribbean Public Health Agency) laboratory, a NIC.
- ³ As of the last update, SARI surveillance in Saint Vincent and the Grenadines does not complete this capacity; however a new system is currently being implemented.
- ⁴ SARI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days that requires hospitalization
- ⁵ Aggregate results from CARPHA laboratory. Source: Pan American Health Organization. Regional Influenza and Other Respiratory Virus Surveillance, PAHO-WHO. Available at: http://ais.paho.org/phip/viz/ed_flu.asp







Suriname – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **544,000** Life expectancy (years)

Men: 68.2Women: 74.5Total: 71.2

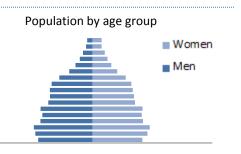
General mortality rate per 1,000 inhabitants

- All causes: 6.3

- Communicable diseases: 0.68

Hospital beds per 1,000 inhabitants: 3.1

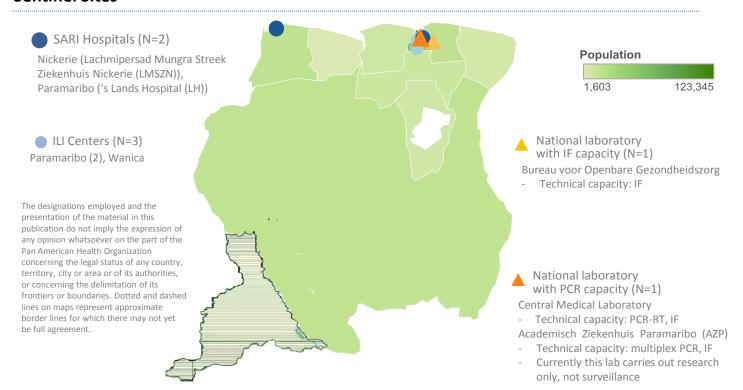
Public health expenditure (% of GDP): 3.4



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
ILI Surveillance (outpatient)	Sentinel	Yes	Nominal

Sentinel Sites²



Information Systems

Integrates epidemiological and virologic information	Partial
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	No
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	No
Bulletins/reports include sentinel surveillance data	NA
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes ²

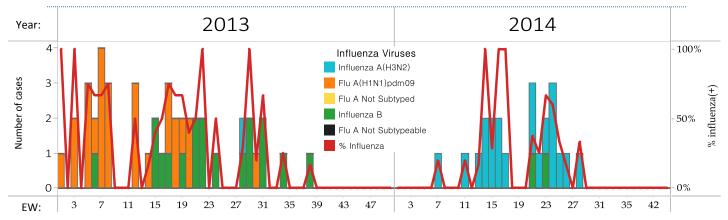
Suriname - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance³

Sen	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	Yes	Yes
Gen	Trainings per year	1	<1
pling	Selection for sampling	100%	Quota 5/week
ı/sam	Systematic randomized sampling	NA	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Case	Frequency of shipment to the laboratory	Weekly	Weekly
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Reference population	Reference population
Data ı analy	Use of baselines or endemic channels	No	No
Evaluation/ monitoring	Sentinel sites evaluated	No	No
Evalu moni	Evaluations per year	NA	NA

Laboratory Surveillance	
National Influenza Center (NIC)	No
Year established as NIC	NA
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	≤ 50
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes ²
Detection of other respiratory viruses by PCR	Yes ²
Plan for quality control	Yes

Circulation of Influenza Viruses 2013-20144



Vaccines

Influenza Pandemic Preparedness Plan

Vaccine composition	Northern Hemisphere	National Pander
Vaccination period	Nov-Jul	
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	NA	Year last update
Percentage of children (6-24 months) that received the vaccine against influenza, 2012	i NA	Year first develo
	10.04441.01	- 6

National Pandemic Preparedness Plan	Yes
Year last updated	2009
Year first developed	2009

Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO. Available at: http://ais.paho.org/phip/viz/ed_flu.asp



¹ Source: St. Lucia Ministry of Health: Basic Indicators, 2012

 $^{^2}$ Sentinel hospitals in Suriname send samples to the CARPHA (Caribbean Public Health Agency) laboratory, a NIC.

³ SARI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days that requires hospitalization ILI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days

⁴ Source: Pan American Health Organization.







Bolivia - Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: 10,848,000 Life expectancy (years)

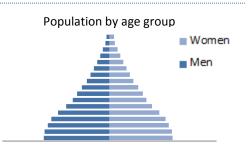
Men: 65.3 Women: 69.8 Total: 67.5

General mortality rate per 1,000 inhabitants

- All causes: 7.22
- Communicable diseases: NA

Hospital beds per 1,000 inhabitants: 1.1

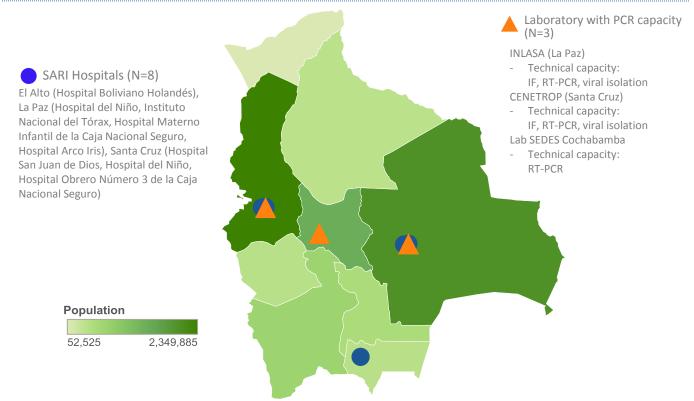
Public health expenditure (% of GDP): 4.1



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
Pneumonia Surveillance	National	No	Aggregate
ARI Surveillance	National	No	Aggregate

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	Partial
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

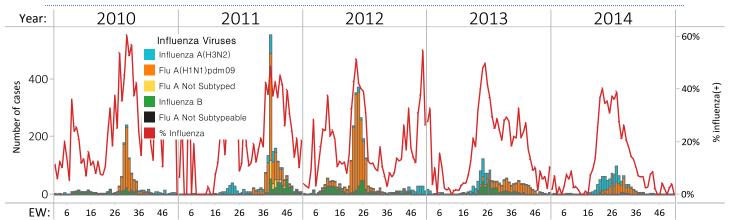
Bolivia - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance³

Sent	inel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	Yes	NA
General	Trainings per year	1	NA
pling	Selection for sampling	100%	NA
ı/sam	Systematic randomized sampling	NA	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	NA
	Frequency of shipment to the laboratory	Daily	NA
ement, orting	Frequency of national updates	Weekly	NA
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	NA
Data ı analy	Use of baselines or endemic channels	Yes	NA
Evaluation/ monitoring	Sentinel sites evaluated	Yes (La Paz) No (Sta Cruz)	NA
Evalu moni	Evaluations per year	<1	NA

Laboratory Surveillance	
National Influenza Center (NIC)	No
Year established as NIC	NA
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	47
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-20144



Vaccines

Vaccine composition	Southern Hemisphere (since 2010)
Vaccination period	May-Jun
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	32
Percentage of children (6-23 months) that received the vaccine against influenza, 2012	36

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2011
Year first developed	2008

⁴ Source: Pan American Health Organization. Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

³ SARI case definition: An acute respiratory infection with history of fever or measured fever of ≥38 °C and cough with onset within the last 10 days that requires hospitalization



Colombia – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: 48,930,000

Life expectancy (years)

Men: 70.6Women: 77.9Total: 74.2

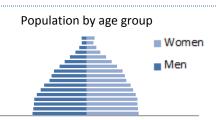
General mortality rate per 1,000 inhabitants

- All causes: 6.8

Communicable diseases: 0.45

Hospital beds per 1,000 inhabitants: 1.5

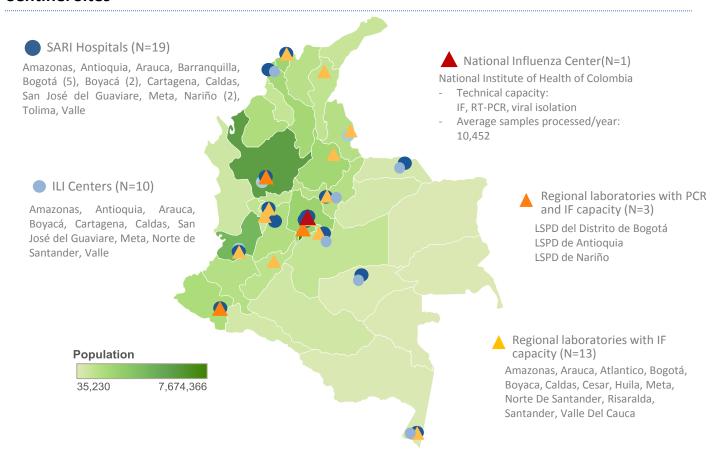
Public health expenditure (% of GDP): 5.2



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
ESI (ILI) Surviellance	Sentinel	Yes	Nominal
SARI Surveillance	Sentinel	Yes	Nominal
Unusual SARI Surveillance	National	Yes	Nominal
ARI Mortality Surveillance in <5-year-olds	National	Yes	Nominal
ARI Morbidity Surveillance	National	No	Aggregate

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	No
Data reported to FluID (PAHO/WHO)	Yes
Data reported to FluNet (PAHO/WHO)	Yes

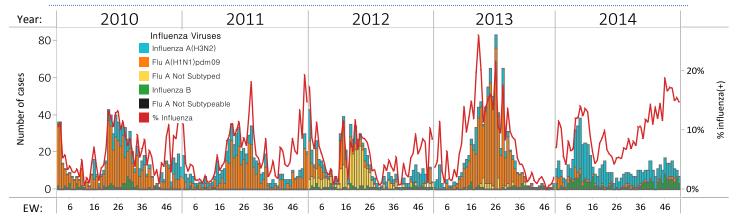
Colombia - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	No	No
General	Trainings per year	1-2	1-2
pling	Selection for sampling	Quota 5/site	Quota 5/site
n/sam	Systematic randomized sampling	Yes	Yes
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Саѕе	Frequency of shipment to the laboratory	Weekly	Weekly
ement, orting	Frequency of national updates	Weekly/ monthly	Weekly/ monthly
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	Outpatient visits
Data ı analy	Use of baselines or endemic channels	No	No
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
Evalu moni	Evaluations per year	2	<1

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	2007
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	201
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-20143



Vaccines

National Pandemic Preparedness Plan

Organization

Yes Year last updated 2010

Influenza Pandemic Preparedness Plan

2007 Year first developed

Vaccine composition	Southern Hemisphere (since 2008)
Vaccination period	Apr
Percentage of older adults (>60 years) that received the vaccine against influenza, 2013	28
Percentage of children (6-23 months) that received the vaccine against influenza, 2013	81

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

38 °C and cough, of no more than 7 days of progression, and that requires ambulatory clinical management.



¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Person with acute respiratory infection with history of fever and cough of no more than 10 days of progression, that requires intra-hospital management. ILI case definition: Patient with acute respiratory infection, with fever greater than or equal to Pan American

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus* Surveillance, PAHO/WHO. Available at: http://ais.paho.org/phip/viz/ed_flu.asp



Ecuador - Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: 15,930,000

Life expectancy (years)
- Men: **74.0**

Women: **79.6**Total: **76.7**

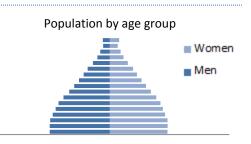
General mortality rate per 1,000 inhabitants

- All causes: 5.9

- Communicable diseases: 0.62

Hospital beds per 1,000 inhabitants: 1.5

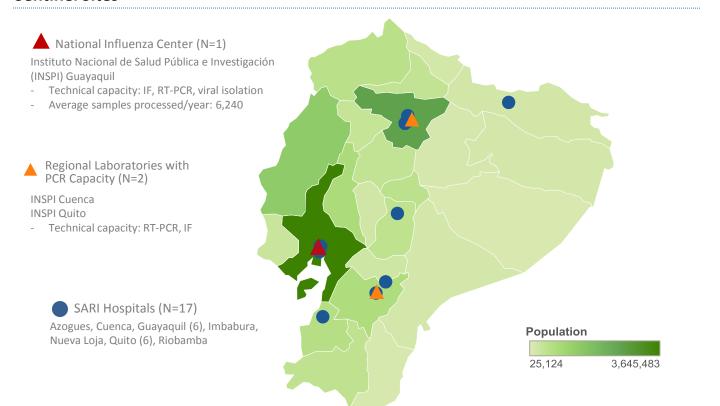
Public health expenditure (% of GDP): 3.9



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
Sentinel SARI Surveillance	Sentinel	Yes	Nominal
Event- or Outbreak-based Surveillance	National	Yes	Aggregate

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	No
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	Yes
Data reported to FluNet (PAHO/WHO)	Yes

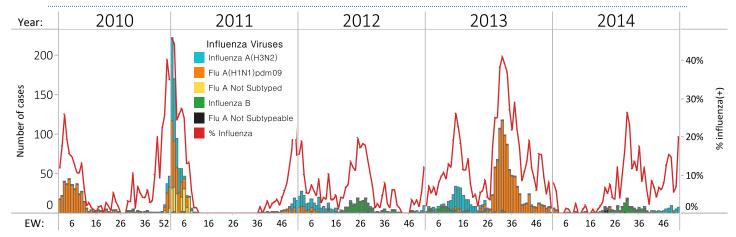
Ecuador - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	Yes	NA
Gen	PAHO/WHO case definition Trainings per year		NA
pling	Selection for sampling	Not standardized	NA
ı/sam	Systematic randomized sampling	No	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	NA
Саѕь	Frequency of shipment to the laboratory	Daily	NA
ement, orting	Frequency of national updates	Weekly	NA
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	NA
Data r analy.	Use of baselines or endemic channels	No	NA
Evaluation/ monitoring	Sentinel sites evaluated	Yes	NA
Evalu moni	Evaluations per year	1	NA

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	2006
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	120
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	No
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-20143



Vaccines

Influenza Pandemic Preparedness Plan

Vaccine composition	Northern Hemisphere
vaccine composition	(since 2006)
Vaccination period	Oct-Dec
Percentage of older adults (>55 years) that received the vaccine against influenza, 2012	54
Percentage of children (6-59 months) that received the vaccine against influenza, 2012	83

National Pandemic Preparedness Plan	Yes
Year last updated	2013 (draft)
Year first developed	2009

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





² SARI case definition: Acute respiratory infection with history of fever or measured fever ≥38 °C and cough, with onset in the last 10 days, that requires hospitalization



Peru - Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)1

Total population: 30,769,000

Life expectancy (years) Men: 72.5

Women: 77.9 Total: 75.1

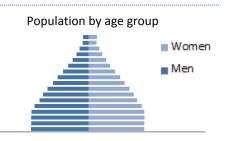
General mortality rate per 1,000 inhabitants

All causes: 6.6

Communicable diseases: 1.55

Hospital beds per 1,000 inhabitants: 1.5

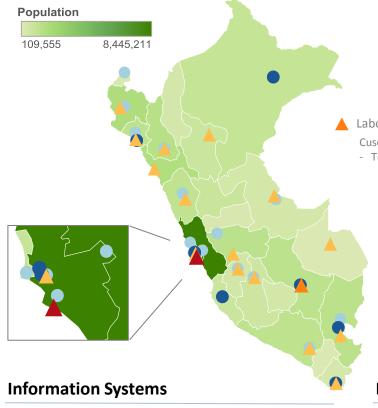
Public health expenditure (% of GDP): 3.0



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal
ARI Surveillance in Children <5 Years Old	National	No	Aggregate
Pneumonia Surveillance in Children <5 Years Old	National	No	Aggregate

Sentinel Sites



Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	No
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

National Influenza Center (N=1)

National Center of Public Health, National Health Institute

- Technical capacity: IF, RT-PCR, viral isolation
- Average samples processed/year: 4,420

Laboratory with PCR Capacity(N=1)

- Technical capacity: IF, RT-PCR

Sentinel SARI Hospitals (N=8) Lima (2), Región Cusco, Región Ica, Región Lambayeque, Región Loreto, Región Puno, Región Tacna

△ Laboratories with IF Capacity (N=16)

Ancash, Arequipa, Ayacucho, Cajamarca, Cusco, Huancavelica, Junín, La Libertad, Lambayeque, Loreto, Lima, Piura, Puno, Tacna, Tumbes, Ucayali.

Sentinel ILI Sites (N=21)

Bulletins/reports generated automatically	Yes
Bulletins/reports published weekly	No
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

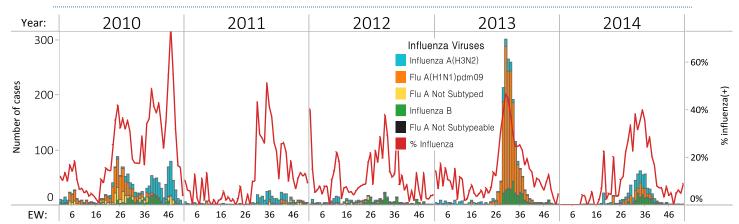
Peru - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance

Ser	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	NA	NA
Gen	Trainings per year	1	1
pling	Selection for sampling	NA	NA
ı/sam	Systematic randomized sampling	NA	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
se	Fun account of abinoment to		Turing
Ca	Frequency of shipment to the laboratory	Weekly	Twice weekly
		Weekly	
	the laboratory	<u>, </u>	weekly
Data management, analysis, reporting	Frequency of national updates	Weekly	weekly
	Frequency of national updates Denominator of number of cases	Weekly	weekly Weekly NA

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	1999
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	85
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014²



Vaccines

Vaccine composition	Northern Hemisphere (North/East regions) Southern Hemisphere (remaining regions)
Vaccination period	Dec-Mar (North/East) May-Sep (remaining)
Percentage of older adults (≥65 year received the vaccine against influent	, <u>4</u> /
Percentage of children (6-23 months received the vaccine against influent	•

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2014
Year first developed	2007

² Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.





Southern Cone and Brazil



Argentina – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2013)¹

Total population: 40,900,496 Life expectancy (years)

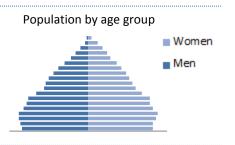
Men: 71.6 Women: 79.1 Total: **75.2**

General mortality rate per 1,000 inhabitants

- All causes: 7.8 (2011)
- Communicable diseases: 0.73 (2011)

Hospital beds per 1,000 inhabitants: 3.7

Public health expenditure (% of GDP): 6.21 (2009)



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel/universal	Yes	Nominal/numeric
ILI Surveillance	Sentinel/universal	Yes	Nominal/numeric
Pneumonia Surveillance	Sentinel/universal	Yes	Nominal/numeric
Bronchiolitis Surveillance	Universal	Yes	Numeric
Unusual Respiratory Event Surveillance	Universal	Yes	Numeric
Mortality Surveillance	Vital Statistics	No	Nominal

Sentinel Sites

SARI Hospitals (N=8)

Buenos Aires, CABA, Jujuy, Mendoza (2), Tierra del Fuego (2), Tucumán



▲ Laboratories with PCR capacity (N>24)

ILI Centers (N=10)

Buenos Aires, Mendoza, Santa Fe, Tucumán

The total number of regional laboratories, including those with IF capacity, is greater than 100 (only those with PCR capacity shown on map).



National Influenza Centers (N=3)

1 - National Institute of Infectious Diseases (Buenos Aires)

National Reference Laboratory for Influenza and respiratory viruses and Coordinator of the National Network of Influenza and RV.

- · Immunofluorescence (IF), RT-PCR, viral isolation (VI), Hemaglutination Inhibition (IHA), sequencing, antiviral susceptibility, serology.
- Molecular detection of other respiratory viruses: HMPV, SARSCoV, MERSCoV, HCoV-OC43, HCoV-229E, HCoV-NL63, HCoV-HKU1, HBoV y RhinoV.
- 2 Influenza and Respiratory Virus Laboratory, Virology Institute (UNC) (Córdoba)
 - IF, RT-PCR, VI, IHA, sequencing, serology (human influenza avian subtypes)
 - Molecular detection of other respiratory viruses: HMPV, HCoV-OC43, HCoV-229E, HHBoV
- 3 National Institute of Epidemiology (Mar del Plata)
 - · IF, RT-PCR, VI, IHA, sequencing, antiviral susceptibility
 - · Molecular detection of other respiratory viruses

Reporting

Bulletins/reports generated automatically	Yes
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	No
Data reported to FluID (PAHO/WHO)	Yes
Data reported to FluNet (PAHO/WHO)	Yes

Population

16,289,599

143,987

Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

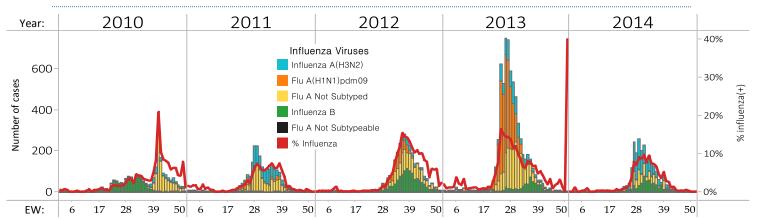
Argentina - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	Yes	Yes
Gen	Trainings per year	<1	<1
pling	Selection for sampling	NA	Quota
ı/sam	Systematic randomized sampling	NA	No
Case selection/sampling	Collection of clinical-epidemiological variables	Partial	Partial
Case	Frequency of shipment to the laboratory	Weekly	Weekly
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	Outpatient visits
Data r analy.	Use of baselines or endemic channels	No	No
Evaluation/ monitoring	Sentinel sites evaluated	Partial	Partial
Evalu moni	Evaluations per year	<1	<1

Laboratory Surveillance	
(year established as NIC)	nos Aires (1968) órdoba (1964) Mar del Plata
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-201	.3) 1,515
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014³



Vaccines

Influenza Pandemic Preparedness Plan

Vaccine composition	Southern Hemisphere (since 1993)	National Pandemic Preparedness Plan	Yes
Vaccination period	Feb-Nov		
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	68	Year last updated	Ongoing
Percentage of children (6-24 months) that received the vaccine against influenza, 2012	76	Year first developed	2007

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO*. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





 $^{^{1}}$ Source: Argentina Basic Health Indicators 2013. National Ministry of Health.

 $^{^2}$ SARI case definition: Sudden appearance of fever higher than 38 °C, cough or sore throat, dyspnea, and need for hospitalization

ILI case definition: Patient of any age with history of sudden fever higher than 38 $^{\circ}$ C and cough or sore throat, and absence of other diagnoses



Brazil - Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

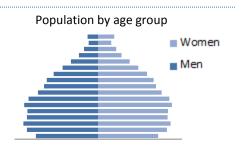
Total population: **202,034,000** Life expectancy (years)

- Men: **70.6** - Women: **77.8** - Total: **74.2** General mortality rate per 1,000 inhabitants

- All causes: 6.4
- Communicable diseases: 0.62

Hospital beds per 1,000 inhabitants: 2.3

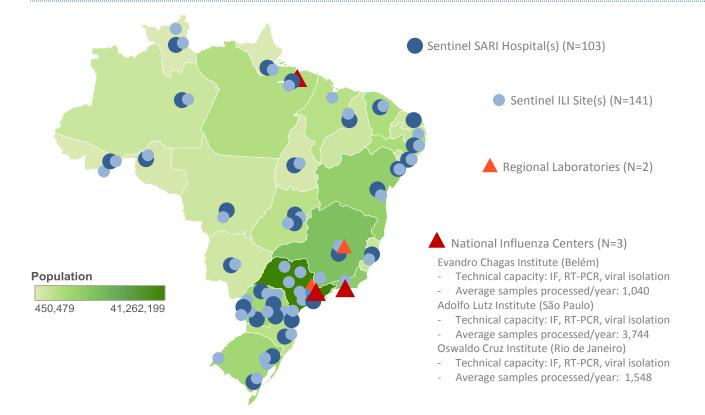
Public health expenditure (% of GDP): 4.0



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
Sivep-gripe (SARI Surveillance)	Sentinel	Yes	Nominal/Aggregate
Sinan web influenza	National	Yes	Nominal

Sentinel Sites



Information Systems

Integrates epidemiological and virologic information	Yes
Integrates different surveillance information systems	No
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No

Bulletins/reports generated automatically	Yes
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

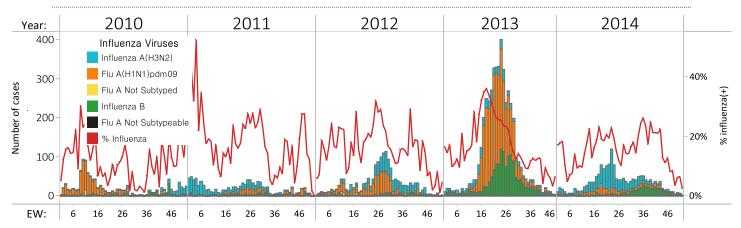
Brazil - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Ser	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	No	No
Gen	Trainings per year	27	27
pling	Selection for sampling	100%	100%
ı/sam	Systematic randomized sampling	NA	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Саѕь	Frequency of shipment to the laboratory	Daily	Daily
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	NA	NA
Data ı analy	Use of baselines or endemic channels	No	Yes
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
Evalu	Evaluations per year	1	1

Laboratory Surveillance		
National Influenza Centers (year established as NIC)	Pará (NA) São Paulo (1960s) Rio de Janeiro (1950s)	
Samples received from all surveillance systems	Yes	
National weekly average samples processed (20	11-2013) 168	
Access to epidemiological case information	Yes	
Samples sent to WHO Collaborating Center	Yes	
Detection of other respiratory viruses by PCR	Yes	
Plan for quality control	Yes	

Circulation of Influenza Viruses 2010-20143



Vaccines

Influenza Pandemic Preparedness Plan

Vaccine composition	Southern Hemisphere (since 1999)	National Pandemic Preparedness Plan	Yes
Vaccination period	Apr-Jun		
Percentage of older adults (≥60 years) that received the vaccine against influenza, 2012	82	Year last updated	2014
Percentage of children (6-23 months) that received the vaccine against influenza, 2012	96	Year first developed	2006

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO*. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Individual of any age, admitted with influenza-like illness and who presents dyspnea or O₂ saturation <95% or difficulty breathing. He/she should be registered or reported dead for SARI independent of the admission.

ILI case definition: Individual with fever, accompanied by cough, and with onset of symptoms in the last 7 days.



Chile - Influenza and Other **Respiratory Virus (ORV) Surveillance**

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: 17,773,000 Life expectancy (years)

Men: 77.4 Women: 82.9 Total: 80.2

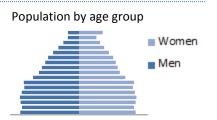
General mortality rate per 1,000 inhabitants

All causes: 4.9

Communicable diseases: 0.30

Hospital beds per 1,000 inhabitants: 2.2

Public health expenditure (% of GDP): 3.5



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
ILI Surveillance	Sentinel	Yes	Aggregate
ARI Surveillance in Primary Health Care (APS)	Sentinel	No	Aggregate
SARI Surveillance	Sentinel	Yes	Nominal
Laboratory Surveillance	National	Yes	Aggregate
Outbreak Surveillance	National	Yes	Nominal
ARI/ILI Urgent Care Hospital Registry	National	No	Aggregate
Registry of Deaths due to Respiratory Causes and Influenza	National	No	Aggregate

Sentinel Sites

SARI Hospitals (N=6)

Concepción (Hospital Guillermo Grant Benavente), Iquique, Puerto Montt, Santiago (Hospital San Juan de Dios, Hospital Militar) Viña del Mar (Hospital Gustavo Fricke)

ILI Centers(N=43) (Not shown on the map)



National Influenza Center (N=1)

Public Health Institute of Chile: Respiratory and Exanthematic Virus Section (Viral disease sub department)

- Technical capacity: Cellular cultivation, IF, RT-PCR, IH, viral isolation, sequencing, phenotype and genotype analysis of antiviral resistance
- Average samples processed/year: 41,808



▲ Laboratories with PCR capacity (N=6)

Antofagasta, Concepción, Puerto Montt, Santiago, San Felipe, Temuco

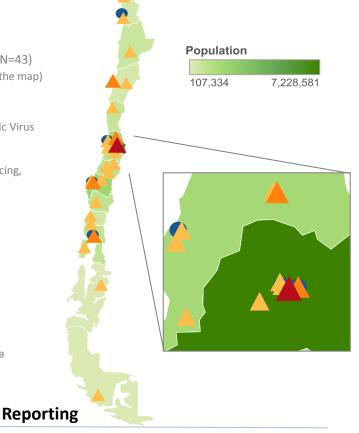


▲ Laboratories with IF capacity (N=24)

Antofagasta, Arica, Atacama, Biobío (2), Coquimbo, Iquique, Los Lagos (2), Los Ríos, Maule (3), Región Aisén, Región Magallanes (2), Región Metropolitana de Santiago (4), Región O'Higgins, Valparaíso (3)

Information Systems

Integrates epidemiological and virologic information	Partial
Integrates different surveillance information systems	Partial
Allows for monitoring of the sentinel site system	Yes
Generates influenza activity indicators	Yes
Generates interactive online dashboard	No



Bulletins/reports generated automatically	Yes
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

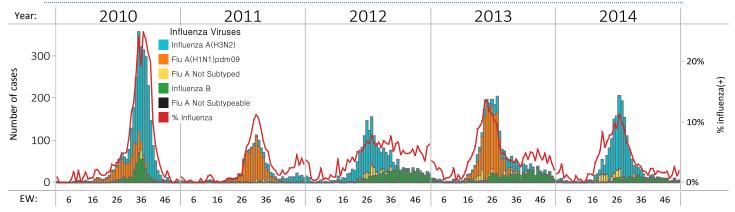
Chile - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
eral	PAHO/WHO case definition	No	No
General	Trainings per year	<1	1
pling	Selection for sampling	100%	Quota 10/site
ı/sam	Systematic randomized sampling	NA	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Case	Frequency of shipment to the laboratory		Daily
ment, rting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	Population registered with APS
Data anal)	Use of baselines or endemic channels	Yes	Yes
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
Evalu moni	Evaluations per year	<1	<1

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	1968
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	840
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014³



Vaccines

Vaccine composition	Southern Hemisphere (since 1975)
Vaccination period	end of Mar
Percentage of older adults (≥65 years) that received the vaccine against influenza, 2012	73
Percentage of children (6-23 months) that received the vaccine against influenza, 2012	98

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2010
Year first developed	2007

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Any person that requires hospitalization for: Fever over 38 °C and cough, and difficulty breathing ILI case definition: Person who seeks medical attention for influenza-like illness: axillary fever ≥38.5 °C and cough, associated with any of the following symptoms: myalgia, odynophagia, or headache



Paraguay – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **6,918,000** Life expectancy (years)

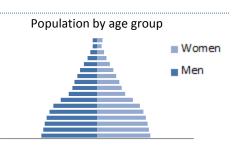
Men: 70.1Women: 74.7Total: 72.3

General mortality rate per 1,000 inhabitants

- All causes: 7.1
- Communicable diseases: 0.61

Hospital beds per 1,000 inhabitants: 1.3

Public health expenditure (% of GDP): 4.3



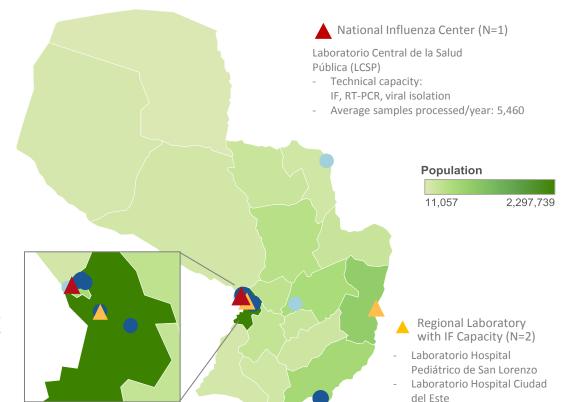
Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
ILI Surveillance	Sentinel	Yes	Nominal
Universal ILI Surveillance	National	No	Aggregate
SARI Surveillance	Sentinel	Yes	Nominal

Sentinel Sites

SARI Hospitals (N=7)

Asunción (Instituto de Medicina Tropical, Hospital Central del Instituto de Previsión Social, Instituto Nacional de Enfermedades Respiratorias y del Ambiente), Central (Hospital Nacional de Itauguá, Hospital General Pediátrico "Niños de Acosta Ñu"), Ciudad del Este (Hospital Regional de Ciudad del Este) Encarnación (Hospital Regional de Encarnación)



ILI Centers (N=5)
 Asunción, Ciudad del Este,
 Coronel Oviedo, Encarnación,
 Pedro Juan Caballero

Information Systems

Bulletins/reports generated automatically	Partial
Bulletins/reports published weekly	Yes
Bulletins/reports include sentinel surveillance data	Yes
Data reported to FluID (PAHO/WHO)	No
Data reported to FluNet (PAHO/WHO)	Yes

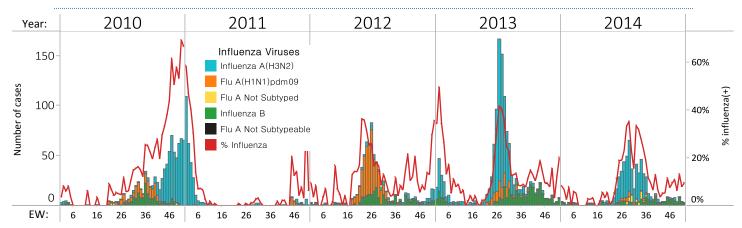
Paraguay - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance²

Sen	tinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	No	No
Gen	Trainings per year	<1	<1
pling	Selection for sampling	100%	Local quotas
n/sam	Systematic randomized sampling	No	No
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	Yes
Case	Frequency of shipment to the laboratory	Weekly	Weekly
ement, orting	Frequency of national updates	Weekly	Weekly
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	Outpatient visits
Data ı analy	Use of baselines or endemic channels	No	Yes
Evaluation/ monitoring	Sentinel sites evaluated	Yes	Yes
Evalu moni	Evaluations per year	1-12	1

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	1998
Samples received from all surveillance systems	No
National weekly average samples processed (2011-2013)	105
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	Yes

Circulation of Influenza Viruses 2010-2014³



Vaccines

Influenza Pandemic Preparedness Plan

Vaccine composition	Southern Hemisphere (since 2005)	National Pandemic Preparedness Plan	Yes
Vaccination period	Apr-May		
Percentage of older adults (>60 years) that received the vaccine against influenza, 2012	41	Year last updated	2011
Percentage of children (6-35 months) that received the vaccine against influenza, 2012	35	Year first developed	2008

³ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO.* Available at: http://ais.paho.org/phip/viz/ed_flu.asp





¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

² SARI case definition: Any person who manifests or has manifested: sudden appearance of fever (measured or referenced and cough and difficulty breathing and need for hospitalization ILI case definition: Any person who manifests sudden appearance of axillary temperature above or equal to 37.5 °C and: cough or sore throat, in the absence of other diagnosis



Uruguay – Influenza and Other Respiratory Virus (ORV) Surveillance

(2014 edition)

Sociodemographic indicators (2014)¹

Total population: **3,419,000** Life expectancy (years)

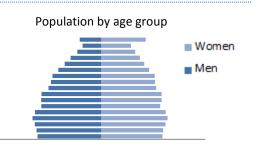
Men: 73.9Women: 80.7Total: 77.4

General mortality rate per 1,000 inhabitants

- All causes: 6.0²
- Communicable diseases: 0.37²

Hospital beds per 1,000 inhabitants: 2.5

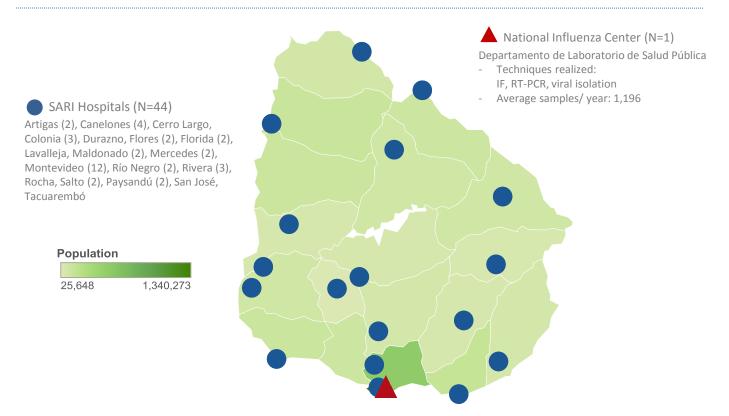
Public health expenditure (% of GDP): 5.9



Surveillance Systems

Surveillance System	Scope	Sample Collection	Data Collection
SARI Surveillance	Sentinel	Yes	Nominal

Sentinel Sites



Information Systems

Integration of epidemiological/virologic information	Yes
Integration of different surveillance information systems	Yes
Allows for monitoring of the sentinel site system	Yes
Provides influenza activity indicators	Yes
Provides interactive online dashboard	Yes

The data bases generate bulletins/reports automatically	Yes
A national bulletin/report is published weekly	No
Includes SARI/ILI sentinel surveillance data	NA
Data reported to PAHO/WHO system FluID	No
Data reported to PAHO/WHO system FluNet	Yes

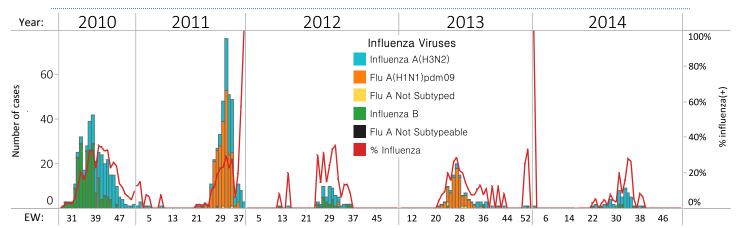
Uruguay - Influenza and ORV Surveillance

SARI/ILI Sentinel Surveillance³

Ser	ntinel Surveillance Characteristics	SARI	ILI
General	PAHO/WHO case definition	Yes (2009)	NA
Gen	Trainings per year	1	NA
pling	Selection for sampling	100%	NA
ı/sam	Systematic randomized sampling	NA	NA
Case selection/sampling	Collection of clinical-epidemiological variables	Yes	NA
Case	Frequency of shipment to the laboratory	Immediate	NA
ement, orting	Frequency of national updates	Immediate	NA
Data management, analysis, reporting	Denominator of number of cases	Hospital admissions	NA
Data ı analy	Use of baselines or endemic channels	No	NA
Evaluation/ monitoring	Sentinel sites evaluated	Yes	NA
.a :≂			

Laboratory Surveillance	
National Influenza Center (NIC)	Yes
Year established as NIC	1980
Samples received from all surveillance systems	Yes
National weekly average samples processed (2011-2013)	23
Access to epidemiological case information	Yes
Samples sent to WHO Collaborating Center	Yes
Detection of other respiratory viruses by PCR	Yes
Plan for quality control	No

Circulation of Influenza Viruses 2010-2014⁴



Vaccines

Vaccine composition Vaccination period Starting in Apr Percentage of older adults (>65 years) with chronic illness that received the vaccine against influenza, 2012 Percentage of children (6-48 months) with chronic illness that received the vaccine against influenza, 2012

Influenza Pandemic Preparedness Plan

National Pandemic Preparedness Plan	Yes
Year last updated	2010
Year first developed	2008

Unless otherwise specified, all data were collected by the PAHO/WHO Influenza Surveillance Team from one or more of the following sources: PAHO questionnaires completed by epidemiology or laboratory experts, influenza bulletins published/ shared by the countries, country presentations in regional influenza meetings, consultation with country influenza surveillance experts. The document was approved by the relevant national authority.

¹ Source: Pan American Health Organization. Health Situation in the Americas: Basic Indicators, 2014.

⁴ Source: Pan American Health Organization. *Regional Influenza and Other Respiratory Virus Surveillance, PAHO/WHO*. Available at: http://ais.paho.org/phip/viz/ed_flu.asp





^{2 2010}

³ SARI case definition: Acute respiratory infection with history of fever or measured fever ≥38 °C and cough, with onset in the previous 10 days that requires hospitalization

Annex 1. Epidemiological Questionnaire (English)

		Ge	neral information			
Country:						
Date of survey completion: (dd/mm/yyyy)						
Person completing the survey:						
Position of the person completing the	survey:					
Institution/Organization:						
Accute Respiratory Infections/Influenza an	d Other Res	piratory Virus Surv	veillance Systems			
Please write the name of each different accute res	piratory infec	tion and/or influenza	a surveillance system (ex 1: SAR		nel; yes [sample is	s collected]; nominal. Ex 2: Pneumon
rrveillance; national or universal; no sample taken System name		ntinel/national)	Takes samples?	System is nomin from each case (numbers of) or aggregate	Brief comments about system
	☐ sentir	el 🗆 national	☐ YES ☐ NO	☐ nominal ☐	aggregate	
	sentir	el 🛘 national	☐ YES ☐ NO	nominal [aggregate	
	☐ sentir	el 🛘 national	☐ YES ☐ NO	nominal [aggregate	
	☐ sentir	el national	☐ YES ☐ NO	nominal [aggregate	
	☐ sentir	el national	☐ YES ☐ NO	nominal [aggregate	
	☐ sentir	el national	☐ YES ☐ NO	nominal [aggregate	
Information System	ıs					
1- Are there information systems mentioned a		s/platforms	for the different su	urveillance	☐ YES	☐ Partially ☐ NO
a. Please list the names infection and/or influen Ex 1: SISFLU (SARI survei	za survie	llance.				ute respiratory
2- How would you qualify the integration among the severe respiratory infection and influenza surveillance information systems in your country?						
Not applicable	L.J.O	and the	-			
There are systems, but they are not integrated						
The systems are partially integrated						
Systemintegration	is optimal					

3-	Only for SARI surveillance: Which of the following functions/characteristicinformation systems have? (select all that apply)	cs do the SARI surveillance
	Not applicable	
	Registers clinical-epidemiological variables/data	
	Registers laboratory variables/data	
	Includes analysis modual (automated analysis)	
	Allows for automated monitoring of different centers (management indicators)	
	Automatically generates reports or bulletins	
	Easy to use	
4-	Are you satisfied with the SARI surveillance systems?	☐ YES ☐ NO
	a. If the answer is NO, Why not? What could be done to improve the situation	ation?
_	Is there an interactive dashboard for results and analysis of influenza and online? (For example, a dashboard that generates graphics that change ac	· ·
5-	regions/age groups/different years)	column to the selection of
	Not applicable	
	No	
	Yes, for internal use	
	Yes, for public use online	
	a. Please describe any comment or needs regarding these surveillance sy	stems:
	STRUCTIONS: If you don't have the information required to fill out the following Indiana, and Indiana, Road and the	
	ainst Influenza and Influenza Pandemic Preparation Plans); simply send the ctions incomplete.	e questionnaire with these
360	ctions incomplete.	
_		
	ccination against Influenza	
6-	During what months is the influenza vaccine administered?	
lvt	luonza Pandomic Proparation Plans	
7.	luenza Pandemic Preparation Plans Does the country have a pandemic preparedness plan?	□ SI □ NO
7-	7.1 Year of original publication	31 140
	7.2 Year of last revision or update	
	Is there a mechanism to update and/or adapt the plan (especially in	
8-	relation to changes in staff or administration)?	☐ SI ☐ NO

8	Organización Panamericana de la Salud Otora inspeción Mundial de la Salud		SARI SURV	EILLAN	ICE SYSTEMS GENER	RAL SURVE	Υ				
				Ger	neral information						
	Co	untry:									
		vey completion: mm/yyyy)									
		eting the survey:									
	Position of the person	n completing the survey:									
	Institution/	/Organization:									
4	D						☐ YES	□ NO	1		
	Does your country carry out SARI su										
	ase write the name of the different S lic; 250 beds; yes, has ICU; 20 ICU be						ago; La Reina, San	tiago; adult;			
											Number
	Name of SARI sentinel hospital	Location (City, province)			Туре		Fund	ing	Number of beds	Has ICU	of ICU beds
			□ nodiatric	☐ adult	□ specialized □ genera	I Cother	□ public □ pri	vate C other		☐ YES ☐ NO	
			_	_			, pass , pass	-			
			pediatric	adult	specialized genera	I cother	public pri	vate other		☐ YES ☐ NO	
			☐ pediatric	adult a	specialized genera	I Cother	public pri	vate other		☐ YES ☐ NO	
			☐ pediatric	adult a	specialized genera	I ☐ other	public pri	vate other		☐ YES ☐ NO	
			pediatric	adult a	specialized genera	I Cother	☐ public ☐ pri	vate other		☐ YES ☐ NO	
			pediatric	adult	☐ specialized ☐ genera	I	□ public □ pr	vate other		☐ YES ☐ NO	
			pediatric	adult	☐ specialized ☐ genera	_		vate other		☐ YES ☐ NO	
			pediatric	☐ adult						☐ YES ☐ NO	
			pediatric	☐ adult	specialized genera	I other	public pri	vate other		☐ YES ☐ NO	
2-	Has a SARI surveillance protoco	ol or a set of standard one	rating proced	lures he	een develoned?				Г	YES NO	
	a. If so, when was it last update	·			· · · · · · · · · · · · · · · · · · ·						
	2.1 Have the team professionals		-						Г	YES NO	
		e of training		<u> </u>	·	Numb	per of trainings i	n the last yea		.20) 110	
		e and case identification						· ·			
	Sampling, st	toring and shipment									
3-	What SARI case definition is us										
		, ,									
4-	Does this definition specify the	start period of symptoms	?						Г	YES NO	
	a. If so, how many days since th	ne onset of symptoms?									
5-	Please briefly describe the met		ises:						Г	YES NO	
	Ed Mb- id-skii- CADI2	Van Faldanialasiak aliai	!								
	5.1- Who identifies SARI cases?	ex. Epidemiologist, ciliid	cai professio	nai, wa	ra nurse, etc)						
										SARI cases	
6-	From which patients are sample	es and files collected?								uota of patients	
									C Oth	er	
	6.1- If not a sample is not collect	cted from all cases, does t	he protocol i	nclude	a plan for standard sa	ampling?				YES NO	
	a. If not all SARI patients are sa	impled, please briefly des	cribe the sar	mpling	plan used.						

6.2- Is the sampling random?

☐ YES ☐ NO

7-	How frequently are sentinel site SARI data sent, nationally?		
8-	Please indicate how frequently the following data are calculated/gathe	ered (if they are calculated) at the national level.	
	Type of	data	Calculated?
	Number of SARI admissions		☐ YES ☐ NO
	Number of SARI admissions with sample		☐ YES ☐ NO
	Number of hospital admissions		☐ YES ☐ NO
	Number of SARI deaths		☐ YES ☐ NO
	Number of hospital deaths		☐ YES ☐ NO
	Number of influenza (+) SARI cases		☐ YES ☐ NO
	Number of influenza (+) SARI cases with risk factors		☐ YES ☐ NO
	Number of influenza (+) SARI cases with symptoms		☐ YES ☐ NO
	Number of influenza (+) SARI cases with result		☐ YES ☐ NO
	Number of influenza (+) SARI cases by age		☐ YES ☐ NO
	How frequently are these calculated? (if not calculated, write NA) (ex. D	Daily, weekly, monthly)	
9-	Are data sorted by age?		☐ YES ☐ NO
	a. If so, describe the age groups		
10-	What denominator is used to measure SARI activity?	☐ 1. All hospitals x all causes ☐ 2. Reference population corresponding to th ☐ 3. Other ☐ 4. No denominators are calculated	ne hospital
	10.1- Are rates of SARI by population calculated at a national level?		☐ YES ☐ NO
	10.2- Are rates of influenza (+) SARI by population calculated at a natio	nal level?	☐ YES ☐ NO
11-	Is there a method of detecting errors in SARI data?		
	a. Sentinel level		☐ YES ☐ NO
	a. If so, briefly describe		
	b. National level		☐ YES ☐ NO
	b. If so, briefly describe		

National data reporting	
12- Is a SARI report prepared at the national level?	☐ YES ☐ NO
12.1- How frequently is it prepared?	
12.2- With which agencies or offices is the report shared?	
Sentinel centers	☐ YES ☐ NO
Health ministry authorities	☐ YES ☐ NO
PAHO Representative Office	☐ YES ☐ NO
PAHO Washington, DC/WHO	☐ YES ☐ NO
US Centers for Disease Control and Prevention	☐ YES ☐ NO
Animal health authorities or ministry of agriculture	☐ YES ☐ NO
Other	☐ YES ☐ NO
42 Le though a pational protocol for manifesting and evaluating CADI continual actors?	E 150 E 110
13- Is there a national protocol for monitoring and evaluating SARI sentinel ceters?	☐ YES ☐ NO
14- How frequently do the members of the surveillance team visit sentinel centers for evaluation, quality control, or assessment?	
Briefly describe the activities carried out on these visits.	
	·
15- Are the hospital admission registry books examined in order to verify if all SARI cases have been documented and identified?	☐ YES ☐ NO
16- How frequently do sentinel hospitals send samples to the labs?	

Organización Panamericana de la Salud ILI SURVEILLANCE SYSTEMS GENERAL SURVEY Organización Panamericana Pan							
		General informa	tion				
Country:	:						
Date of survey co (dd/mm/y							
Person completing	the survey:						
Position of the person com	npleting the survey:						
Institution/Orga	nization:						
1- Does your country carry out IL	I Surveillance?				□ SI □ NO		
Name of ILI sentinel site	Location (city, province)		Туре		Public/Private		
		pediatric adult	specialized general	other	public private	other	
		pediatric adult	specialized general	other	public private	other	
		pediatric adult	specialized general	other	public private	other	
		pediatric adult	specialized general	other	public private	other	
		pediatric adult	specialized general	other	public private	other	
		☐ pediatric ☐ adult	specialized general	other	public private	other	
		pediatric adult	specialized general	other	public private	other	
		pediatric adult	specialized general	other	public private	other	
2- Has an ILI surveillance protocol o	r national manual or a set of s	tandard operating proced	lures been developed?		☐ YES ☐ NO		
a. If so, when was it last updated		· · · · · · · · · · · · · · · · · · ·					
2.1 How the team professionals	haan trainad on the implement	tation of the protocol?			☐ YES ☐ NO		
2.1 Have the team professionals I	· · · · · · · · · · · · · · · · · · ·	tation of the protocor?	Number of trai	nings nervea			
ILI surveillance and c				8-			
Sampling, storing							
2 Mb-4111 d-fi-isi i d2							
3- What ILI case definition is used?							
4- Does this definition specify the s	tart period of symptoms?				☐ YES ☐ NO		
a. If so, how many days since the	, ·						
5- Please briefly describe the metho	od used to detect/capture/iden	tify ILI cases:					

5.1- Who identifies ILI cases? (Ex. Epidemiologist, clinical professional, ward nurse, etc)

From how many ILI patients are samples and files collected per health center each week?

a. If so, please briefly describe the sampling plan used.

6.2- Is the sampling random?

6.1- If not a sample is not collected from all cases, does the protocol include a plan for standard sampling?

☐ YES ☐ NO

☐ YES ☐ NO

7- How frequently are sentinel site ILI data sent, nationally? (Ex. ev	very day, weekly, etc)			
8- Please indicate if the following data are calculated/gathered at	the national level.			
Туре	of data	Calculated?		
Number of ILI consultations		☐ YES ☐ NO		
Number of ILI consultations with sample		☐ YES ☐ NO		
Number of hospital admissions		☐ YES ☐ NO		
Number of influenza (+) ILI cases with sample				
How frequently are these data calculated? (ex. daily, weekly, mo	onthly) (if not calculated, write NA)			
9- Are data sorted by age?		☐ YES ☐ NO		
a. If so, describe the age groups				
10- What denominator is used?	 1. All hospitals x all causes 2. Reference population corresponding to 3. Other 4. No denominators are calculated 	the hospital		
10.1- Is the rate of ILI by population calculated for analysi	s at the national level?	☐ YES ☐ NO		
10.2- Is the rate of influenza(+) ILI by population calculate	d for analysis at the national level?	☐ YES ☐ NO		
11- Is there a method of detecting errors in ILI data?				
a. Sentinel level		☐ YES ☐ NO		
a. If so, briefly describe				
b. National level		☐ YES ☐ NO		
b. If so, briefly describe				

National data reporting					
12- Is an ILI report prepared at the national level?	☐ YES ☐ NO				
12.1- How frequently is it prepared?					
12.2- With which agencies or offices is the report shared?					
Sentinel centers	☐ YES ☐ NO				
Health ministry authorities	☐ YES ☐ NO				
PAHO Representative Office	☐ YES ☐ NO				
PAHO Washington, DC/WHO	☐ YES ☐ NO				
US Centers for Disease Control and Prevention	☐ YES ☐ NO				
Animal health authorities or ministry of agriculture	☐ YES ☐ NO				
Other	☐ YES ☐ NO				
13- Is there a national protocol for monitoring and evaluating ILI sentinel ceters?	☐ YES ☐ NO				
14- How frequently do the members of the surveillance team visit sentinel centers for evaluation, quality control, or assessment?					
Briefly describe the activities carried out on these visits.					
15- Are the hospital admission registry books examined in order to verify if all ILI cases have been documented and identified?	☐ YES ☐ NO				
16- How frequently do the sentinel sites send samples to the laboratories? (Ex. every day, weekly, etc)					



