Tom Safranek, M.D.

Nebraska State Epidemiologist

tom.safranek@hhss.state.ne.us

402 471 – 0550

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NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM

Laboratory Summary of Reportable Diseases, Poisonings and Organisms (Including Sexually Transmitted Diseases) Nebraska Department of Health and Human Services

Submit on copy not later than Tuesday of each week to:

Nebraska Department of Health and Human Services
Regulation and Licensure
Communicable Disease
P.O Box 95007
Lincoln, Nebraska 68509-5007

PATIENT'S NAME		ADDRESS	Date of		Name of			PHYSICIAN		
Last	First	Street, City, State, Zip	Birth/Age	Sex	Test	Result	Date	Name	Phone	City

1 of 2 11 x 8.5 in
Local intranet

LABORATORY CORPORATION OF AMERICA
STATE REPORTING

DATE: 10-09-2002 PAGE: 1

LAB ADDRESS: NE PATIENT NAME/ADDRESS PAT. ID

LABCORP KANSAS CITY
1706 N CORRINGTON AVE
KANSAS CITY MO 64120-0000

SPECIMEN NUMBER	SPECIMEN DATE	AGE YEARS	AGE MONTHS	SEX	BIRTHDATE	RPT DATE
27762001650	10-04-2002	046	01	M	08/30/	10/08/2002

TEST NAME	TEST NUM	RESULT	UNITS	PERFORMING LAB
Hep C Virus Ab	140608	*		KC
Result: REPEATEDLY REACTIVE				

enter hep C Ab (+)
DL

AGENCY ADDRESS:

COMMUNICABLE DISEASE
NE HHS R&L
P.O. BOX 95007
LINCOLN NE 68509-5007

CUSTOMER ADDRESS: ACCT # 26409490

NE DEPT OF CORRECTIONAL SERV
D & E
3216 W.VAN DORN P.O BOX 22800
LINCOLN NE 68542-2800
PHONE: (402) 479-6333
PHYSICIAN: LE MAR

Collected Oct - 4

Analyzed Oct - 9

Local Health Oct - 11

MO State Oct - 24

NE State Nov - 04

11-04-2002

DHSS
RECEIVED
OCT 24 2002
CD CONTROL
PRIMARY

KCMO HEALTH DEPT.-CDP
OCT 11 2002
REC'D & FORWARDED

Nebraska Public Health Surveillance Organizations

State

Pop 997,000 (58%)

Lancaster Co.

Pop 250,000 (15%)

Douglas Co.

Pop 464,000 (27%)

Nebraska Population 1.7 M

Collaborators

- Nebraska Health and Human Services - Public Health Assurance
- Nebraska Information Management Services
- Computer Science Corporation - CDC contractor

Collaborators

- Centers for Disease Control and Prevention
- Douglas County Health Department
- Lancaster County Health Department
- University of Nebraska Medical Center - Public Health Laboratory

NEDSS Timeline

- 7/2000: first NEDSS grants
- 8/2001: begin NBS installation
- 1/2002: first NEDSS components installed
- 1/2003: go-live: 3 program-area modules
- 5/2003: go-live: electronic laboratory reporting

Single Site Access

- Guardian
  - Developed by State IMS
  - Single logon
  - Single site administration
  - User directory
  - Plan to change to 2-factor authentication

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MServices
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GUARDIAN

Guardian

Nebraska's Secure Solution

Welcome to Guardian Developed and Maintained by IMServices

Register Organization | Paystubs Online Registration | Contact Info

Login

User ID: ==========

Password: ••••••••••••

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GUARDIAN

Guardian

Nebraska's Secure Solution

Welcome Tom Safranek

Welcome | Logout | Contact Info

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HAN , Organization Admin ,
Self Administration

Nebraska Public Health

NEDSS , NEDSS Test ,
PHLIP , Self Administration

STATE OF NEBRASKA

Paystub application , Self Administration

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Nebraska

Homepage

User Name: Tom Safranek

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NND Notifications for Approval (0)

ELR Program Area or Jurisdiction Assignment (9)

New Lab Reports For Review (18)

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Nebraska

ELR Program or Jurisdiction Assignment

User Name: Tom Safranek

- me
- Entry
- mary Data
- stigations
- orts
- tem Admin
- o
- out

Date Received	Date Collected	Ordered Test Name	Observation ID
05/10/2003	04/28/2003	HEAVY METALS PROFILE II, BLOOD	OBS10064114NE01
05/10/2003	05/02/2003	LEGIONELLA PNEUMOPHILA ABS.	OBS10064120NE01
05/10/2003	05/02/2003	LEGIONELLA PNEUMOPHILA ABS.	OBS10064123NE01
05/10/2003	05/05/2003	HAVAB+HBSAB&AG+HCVAB	OBS10064126NE01
05/10/2003	05/05/2003	HAVAB+HBSAB&AG+HCVAB	OBS10064130NE01
05/10/2003	05/06/2003	HAVAB+HBSAB&AG+HCVAB	OBS10064134NE01
05/10/2003	05/06/2003	HAVAB+HBSAB&AG+HCVAB	OBS10064137NE01
05/10/2003	05/06/2003	HAVAB+HBSAB&AG+HCVAB	OBS10064140NE01
05/10/2003	05/06/2003	HAVAB+HBSAB&AG+HCVAB	OBS10064143NE01

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https://nphlweb.unmc.edu/nedss/ELRNeedingAssignment1.do?ContextAction=View&observationUid=10083401
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This is an Electronically Submitted Lab Result

Lab Order Information | Results

Ordered Test Name: HAVAB+HBSAB&AG+HCVAB

*** Program Area:**

Jurisdiction:

☑ Share record with Guests for this Program Area and Jurisdiction

You must enter at least 1 of the following: Ordering Provider, Ordering Facility or Reporting Lab.

Ordering Provider

First: **Last:** PRUSMACK

Person ID: PSN10032055NE01

Phone Number: 402-479-6333 **Ext:**

Ordering Facility

Name: NE DEPT OF CORRECTIONAL SERV

Organization ID: ORG10013000NE01

Phone Number: 402-479-6333 **Ext:**

Reporting Lab

Name: LABCORP

Organization ID: ORG10013001NE01

Phone Number: **Ext:**

Specimen

Age of subject at time of specimen collection:

Collection Date: 05/05/2003

Specimen Source:

Specimen Site:

one Internet

Intentionally Left Blank

- Patient name
- Date of birth
- Test name
- Sex

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https://nphlweb.unmc.edu/nedss/CreateInvestigation1.do?ContextAction=DiagnosedCondition#
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Medical History

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The following questions are provided as a guide for the investigation of lifetime risk factors for HCV infection. Routine collection of risk factor information for persons who test HCV positive is not required. However, collection of risk factor information for such persons may provide useful information for the development and evaluation of programs to identify and counsel HCV infected persons.

- Did the patient receive a blood transfusion prior to 1992?
- Did the patient receive an organ transplant prior to 1992?
- Did the patient receive clotting factor concentrates produced prior to 1987?
- Was the patient ever on long term hemodialysis?
- Has the patient ever injected drugs not prescribed by a doctor even only once or a few times?
- How many sex partners has the patient had? (approximate lifetime)
- Was the patient ever incarcerated?
- Was the patient ever treated for a sexually transmitted disease?
- Was the person ever a contact of a person who had hepatitis?
- Was the patient ever employed in a medical or dental field involving direct contact with human blood?

Submit Cancel

Internet

Current Status

- Over 800 cases entered and reported
- Over 3000 person and organizations in data store
- Live lab data feed began on May 5

Audit of LabCorp ELR

- 653 individuals/824 test records with the following data elements
- Name 653 (100%)
- DOB 643 (98%)
- MD Phone 600 (93 %)
- Gender 647 (99 %)
- LOINC 824 (100 %)

Nebraska Challenges

- Mastering work flow: de-duplication, maintenance, and reviewing of inbound lab data
- Revise State Rules and Regulation
- Facilitating hospitals and laboratory participation

Nebraska Challenges

- Managing varied data streams
- Selecting optimal ELR data management approach
  - In house
  - Contractor
  - Reporting laboratory

Nebraska Challenges

- Legacy data integration
- Managing lab reports during phased roll out pending new PAMs

Challenge

- Use the data to do public health
- Example with antibiotic susceptibilites

ELR: Antibiotic Susceptibility

Methicillin-sensitive Staphylococcus aureus

OBSERVATION IDENTIFIER	OBSERVATION SUB-ID	OBSERVATION VALUE
11475-1^MICROORGANISM IDENTIFIED^LN^997876^RSLT#1^L	1	^^^STAPAU^Staphylococcus aureus^L
^^^BAC16^BACTRIM^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^CEF05^CEFAZOLIN^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^CLI09^CLINDAMYCIN^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^CIP08^Ciprofloxacin^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^ERY10^ERYTHROMYCIN^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^GEN11^GENTAMICIN^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^LEV12^Levofloxacin^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^OXA18^OXACILLIN^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^PEN14^PENICILLIN^L	1	G-D460^RESISTANT^SNM^R^RESISTANT^L
^^^TET15^TETRACYCLINE^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L
^^^VAN17^VANCOMYCIN^L	1	G-D450^SENSITIVE^SNM^S^SENSITIVE^L

Nebraska Methodist Hospital

2002 Guide to Antimicrobial Therapy

2001 Microbial Susceptibility (# of isolates tested)	
Gram-Positive	Gram-Negative

Staphylococcus aureus (620)	Coag-neg. Staphylococcus (170)	Streptococcus pneumoniae (76)	Enterococcus sp. (283)	Escherichia coli (1331)	Klebsiella sp. (280)	Enterobacter sp. (108)	Proteus mirabilis (124)	Serratia sp. (33)	Citrobacter sp. (56)	Haemophilus influenzae (37)	Pseudomonas aeruginosa (258)

Microbiology lab	4578
ID Consult	8155
Epidemiology	8715
Pharmacy	4334
Pharmacokinetics	4343

Antimicrobial Agent — % Susceptible

Antimicrobial Agent	Staphylococcus aureus (620)	Coag-neg. Staphylococcus (170)	Streptococcus pneumoniae (76)	Enterococcus sp. (283)	Escherichia coli (1331)	Klebsiella sp. (280)	Enterobacter sp. (108)	Proteus mirabilis (124)	Serratia sp. (33)	Citrobacter sp. (56)	Haemophilus influenzae (37)	Pseudomonas aeruginosa (258)
Beta-lactams												
ampicillin				88	66			89				
amoxicillin/clavulanate	69	35									99	
ampicillin/sulbactam	69	35										
imipenem/cilastatin							100		100			
oxacillin (nafcillin)	69	35										
penicillin G	9	12	61	88								
piperacillin/tazobactam					98	99	92	100	100	98		99
Cephalosporins												
cefazolin	69	35			95	95		89		25		
cefotetan					100	100		98				
cefpodoxime					72	86		88		92	100	
ceftazidime												96
†ceftriaxone			84		100	99	85	100	94	93	100	
cefuroxime										80		
cephalexin	69	35			72	86		93		21		
Aminoglycosides												
amikacin												93
gentamicin					98	99	97	98	88	100		84
tobramycin					98	99	97	98		91		93
Quinolones												
ciprofloxacin	42	40		48	98*	98*	95*	90*	79*	93*		74*
levofloxacin	68	45	92	52								
Miscellaneous												
clarithromycin												
clindamycin	67	64	86									
erythromycin	56	33	62									
nitrofurantoin*	100	98		96	98	64	31	0	0	96		
tetracycline*	96			38	83	91	85		0	77		
trimethoprim/ sulfamethoxazole	100	64	66		86	93	91	94	91	88	89	
Vancomycin	100	100	100	98								

†Ceftriaxone also predicts the sensitivity to cefotaxime.

* Ciprofloxacin also predicts the sensitivity to Levofloxin

* Denotes Urinary Isolates Only (empty box) Agent NOT Tested

Appropriate Use of Vancomycin

- Treatment of serious infections caused by beta-lactamase resistant Gram-positive microoganisms; or
- Treatment of infections caused by Gram-positive microorganisms in patients who have serious allergies to beta-lactam antimicrobials; or
- When antibiotic-associated colitis fails to respond to metronidazole therapy or is severe and potentially life-threatening; or
- Prophylaxis, as recommended by the American Heart Association, for following certain procedures in the patients at high risk for endocarditis; or
- Prophylaxis for major surgical procedures involving implantation of prosthetic materials or devices at institutions that have a high rate of infections caused by MRSE & MRSA.

Relative Acquistion Cost/Day

Parenteral Antimicrobials

Antimicrobial: Generic Name	Brand Name	Regimen: Adult Dose & Interval		Renal Impairment Adjustment	Daily Cost of Therapy
amikacin	**Amikin®**	500mg	q12h	Yes	$
ampicillin	**Ampen®**	1g to 2g	q4-6h	Yes	$
ampicillin +sulbactam	**Unasyn**	1.5g - 3.0g	q6h	Yes	$$$
cefazolin	**Ancef®**	1g	q8h	Yes	$
cefepime	**Maxipime®**	1g - 2g	q12h	Yes	$$$
cefotaxime	**Claforan®**	1g - 2g	q8h	Yes	$$$
cefotetan	**Cefotan®**	1g - 2g	q12h	Yes	$$
ceftazidime	**Fortaz®**	1g - 2g	q8h	Yes	$$$
ceftriaxone	**Rocephin®**	1g	q24h	No	$$
cefuroxime	**Zinacef®**	750mg - 1.5g	q8h	Yes	$$
chloramphenicol	**Chloromycetin**	12.5mg-25mg/kg	q6h	No	$
ciprofloxacin	**Cipro®**	200mg - 400mg	q12h	Yes	$$$
clindamycin	**Cleocin®**	600mg - 900mg	q8h	No	$$
erythromycin		500mg - 1g	q6h	No	$
gentamicin	**Garamycin®**	80mg	q8h	Yes	$
imipenem + cilastatin	**Primaxin®**	500mg	q6-8h	Yes	$$$$
levofloxacin	**Levaquin®**	250-500qd		Yes	$
metronidazole	**Flagyl®**	500mg	q8h	No	$
nafcillin	**Nafcil®**	1g - 2g	q4-6h	No	$
oxacillin	**Prostaphin®**	1g - 2g	q4-6h	No	$
penicillin G	**Pfizerpen®**	1-4 million units	q4-6h	Yes	$
piperacillin + tazobactam	**Zosyn®**	3.375g - 4.5g	q6-8h	Yes	$$$
rifampin	**Rifadin®**	300mg	q12h	No	$$$$$
tobramycin	**Nebcin®**	80mg	q8h	Yes	$
trimethoprim+	**Bactrim®**	160+800mg	q6h	Yes	$
sulfamethoxazole	**Septra®**				
vancomycin	**Vancocin®**	1g	q12h	Yes	$

†Cost Code based on *daily* average cost of therapy in dollars
$ = <20; $$ = 21 - 40; $$$ = 41 - 60; $$$$ = >61; $$$$$ = most expensive

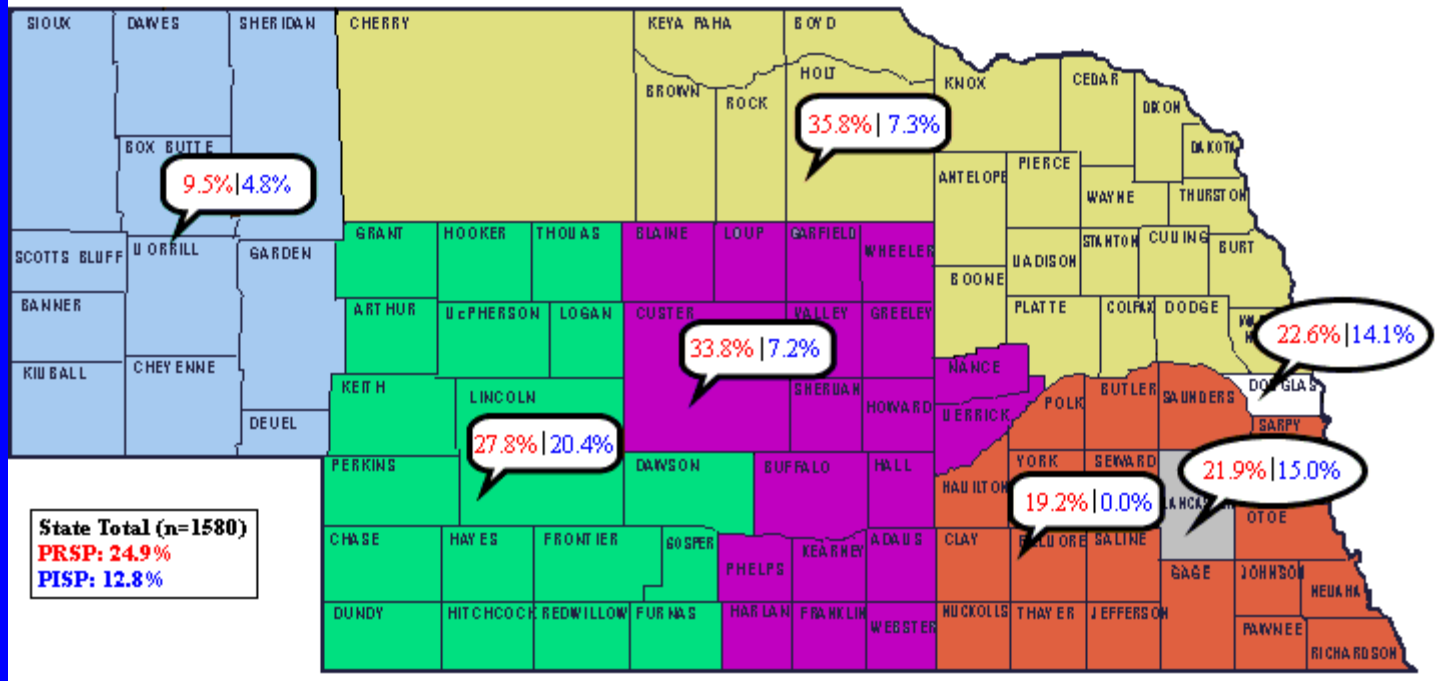
Oral Antimicrobials

Antimicrobial: Generic Name	Brand Name	Regimen: Adult Dose & Interval		Renal Impairment Adjustment	Daily Cost of Therapy
amoxicillin	**Amoxil®**	250mg - 500mg	tid	Yes	$
amoxicillin + clavulanate	**Augmentin®**	500mg - 875mg	bid	Yes	$$$
ampicillin	**Polycillin®**	500mg	qid	Yes	$
azithromycin	**Zithromax®**	500mgx1;250mg	x 4d	No	$$$
		500mg	qd		$$$
carbenicillin 382mg	**Geocillin®**	1 to 2 tablets	qid	Yes	$$$$
cefadroxil	**Duricef®**	500mg-1gm	qd-bid	Yes	$$$
cefpodoxime proxetil	**Vantin®**	100mg - 400mg	bid	Yes	$$$
cefuroxime axetil	**Ceftin®**	125mg - 500mg	bid	Yes	$$$
cephalexin	**Keflex®**	500mg - 1000mg	qid	Yes	$
ciprofloxacin	**Cipro®**	250mg - 500mg	bid	Yes	$$$
clarithromycin	**Biaxin®**	250mg - 500mg	bid	No	$$$
clindamycin	**Cleocin®**	150mg - 300mg	qid	No	$$
dicloxacillin	**Dynapen®**	250mg - 1000mg	qid	Yes	$
erythromycin base	**E-mycin®**	250mg - 500mg	qid	No	$
	Eryc®	250mg - 500mg	qid		$$
	PCE®	333mg - 500mg	tid		$$
levofloxacin	**Levaquin®**	250mg - 500mg	qd	Yes	$$$
metronidazole	**Flagyl®**	250mg - 500mg	qid	No	$
nitrofurantoin	**Macrodantin®**	50mg - 100mg	qid	Yes	$$
norfloxacin	**Noroxin®**	400mg	bid	Yes	$$$
penicillin VK	**Pen Vee K®**	250mg - 500mg	qid	Yes	$
rifampin	**Rifadin®**	300mg	bid	No	$$
tetracycline	**Sumycin®**	500mg	qid	No	$
trimethoprim +	**Bactrim®**				
sulfamethoxazole	**Septra®**	1 double strength	bid	Yes	$
vancomycin	**Vancocin®**	125mg - 250mg	qid	No	$$$$$

†Cost Code based on *daily* average cost of therapy in dollars
$ = <1.00; $$ = 1.01 - 5.25; $$$ = 5.30 - 9.00; $$$$ = >9.01; $$$$$ = most expensive

Do NOT Remove This Table From the Patient's Chart

Percentage of PRSP and PISP among total *S. pneumoniae* isolates by region/county of reporting laboratory, Nebraska, 2001



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- Fax and e-mail capable
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Nebraska Health and Human Services

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Facility Contact | Media Contact | Public Health | **Health Professional**

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- View Results
- Confirm Selections
- Additional Recipients
- Create Message
- Confirmation

Facility Contact | Media Contact | Public Health | Health Professional

By Degree Type: ---- All ---- / APRN / CDE

---------- And/Or ----------

By Primary Specialty: Neonatal-Perinatal Medicine / Nephrology / Neurology

---------- And/Or ----------

By County: ---- All ---- / Adams / Antelope

---------- And/Or ----------

By Last Name:

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Nebraska Health and Human Services

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Facility Contact | Media Contact | Public Health | Health Professional

Select	First Name	Last Name	Degree	Specialty	County	Email Address	Fax Number
☐	Martin	Bierman	Medical Doctor (MD)	Nephrology	Douglas		(402) 398-6744
☐	John	Egan	Medical Doctor (MD)	Nephrology	Douglas		(402) 977-5683
☐	Thomas	Knight	Medical Doctor (MD)	Nephrology	Douglas		(402) 398-6744
☐	Richard	Hranac	Medical Doctor (MD)	Nephrology	Buffalo	rahranac@kearney.net	(308) 865-2541
☐	Jerry	Fischer	Medical Doctor (MD)	Nephrology	Douglas		(402) 398-6744
☐	Scott	Liggett	Medical Doctor (MD)	Nephrology	Lancaster		(402) 466-8351
☐	Leslie	Spry	Medical Doctor (MD)	Nephrology	Lancaster	LSpryGuy@AOL.com	(402) 484-5630
☐	James	Frock	Medical Doctor (MD)	Nephrology	Douglas	docfroc@creighton.edu	(402) 342-4210
☐	Thomas	Neumann	Medical Doctor (MD)	Nephrology	Douglas		(402) 398-6744
☐	Jeffrey	Marple	Medical Doctor (MD)	Nephrology	Lancaster		(402) 484-5630
☐	Timothy	Govaerts	Medical	Nephrology	Lancaster		(402) 484-

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Facility Contact | Media Contact | Public Health | Health Professional

* Required Fields

Message Subject:

Image Header Type: ○ Advisory ◉ None ○ Alert ○ Update ○ Plain

Message

Attachments: Browse...

Delivery Method: ☐ Fax ☐ Email

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Tom Safranek
02/28/2003 03:45 PM

To: Bierman@(402) 398-6744@nefax, Egan@(402) 977-5683@nefax, Knight@(402) 398-6744@nefax, Hranac@(308) 865-2541@nefax, Fischer@(402) 398-6744@nefax, Liggett@(402) 466-8351@nefax, Spry@(402) 484-5630@nefax, Frock@(402) 342-4210@nefax, Neumann@(402) 398-6744@nefax, Marple@(402) 484-5630@nefax, Govaerts@(402) 484-5630@nefax, Dunlay@(402)

cc:

Subject: blast fax: Unconfirmed Reports of Renal Failure in Sudanese Refugees

<NOCOVER>
<PRIORITY:HIGH>

Nebraska
Epidemiology

Nebraska Health and Human Services System P.O. Box 95007 Lincoln, NE 68509-5007

Epidemiology Reports are available on the Nebraska HHS Website at: http://www.hhs.state.ne.us

Fax

TO: Nebraska Nephrologists

FROM: Thomas J. Safranek, M.D.
State Epidemiologist
Nebraska Health and Human Services, Regulation and Licensure
402-471-0550

RE: Unconfirmed Reports of Renal Failure in Sudanese Refugees

DATE: February 28, 2003

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New Memo | Reply | Forward | Delete | Folder | Copy into | Tools

Tom Safranek
02/28/2003 03:45 PM

To: Bierman@(402) 398-6744@nefax, Egan@(402) 977-5683@nefax, Knight@(402) 398-6744@nefax, Hranac@(308) 865-2541@nefax, Fischer@(402) 398-6744@nefax, Liggett@(402) 466-8351@nefax, Spry@(402) 484-5630@nefax, Frock@(402) 342-4210@nefax, Neumann@(402) 398-6744@nefax, Marple@(402) 484-5630@nefax, Govaerts@(402) 484-5630@nefax, Dunlay@(402)

cc:

Subject: blast fax: Unconfirmed Reports of Renal Failure in Sudanese Refugees

FROM: Thomas J. Safranek, M.D.
State Epidemiologist
Nebraska Health and Human Services, Regulation and Licensure
402-471-0550

RE: Unconfirmed Reports of Renal Failure in Sudanese Refugees

DATE: February 28, 2003

Dear Doctor:

I am faxing this message to all Nebraska nephrologists to request assistance in assessing recent reports from CDC regarding unexplained renal failure in Sudanese refugees in Nebraska. James Barrow, the Center for Disease Control's Chief of Field Operations Branch at Division of Global Migration and Quarantine, received reports from the Office of Refugee Resettlement (ORR) regarding Sudanese refugees ("lost boys") with unexplained renal failure in Nebraska and possibly other states.

If you are aware of patients fitting this description, I would be very grateful if you would contact my office with information about these individuals. I can be reached at

Phone 402-471-0550
fax: 402-471-3601
e-mail: tom.safranek@hhss.state.ne.us

Some highlights are not visible with this form | Office

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Welcome | Tom Safranek - Kidney/Renal | My Personal Address Book -... | Tom Safranek - Calendar | Sudanese Refugees/Renal Failure

New Memo | Reply | Forward | Delete | Folder | Copy into | Tools

"Claire Gallimore" <CNPD2@ALLTEL.NET >
03/10/2003 09:41 AM

To: "Tom Safranek" <tom.safranek@hhss.state.ne.us>
cc:
Subject: Sudanese Refugees/Renal Failure

Dear Tom:

We have had one patient that we sent to the Dialysis Center of Lincoln for hemodialysis because of acute hepatitis B positivity. His initials are LM and Dr. Roy may have discussed this with you already.

Sincerely,
Scott P. Liggett, M.D.
Consultative Nephrology
307 North 46th Street
Lincoln, Nebraska 68503
402-466-8259

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Welcome | Tom Safranek - All Doc... | My Personal Addre... | Tom Safranek - Calendar | Sudanese Refuge... | Re: Sudanese Refu...

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Tom Safranek
03/10/2003 10:40 AM

To: "Claire Gallimore" <CNPD2@ALLTEL.NET>
cc:
Subject: Re: Sudanese Refugees/Renal Failure

Scott:

Really appreciate the follow-up. Yes, I have a report on this patient. I appreciate your taking the trouble to assist us in tracking this problem. In fact, I've learned of two such cases, both with reasonable explanations (co-infection with hepatitis B/C in one, and diabetes in the other), and nothing to suggest an unusual public health problem.

Appreciate your help.

Tom

Thomas J. Safranek, M.D.
State Epidemiologist
Nebraska Health & Human Services
phone: (402) 471-0550
fax: (402) 471-3601
"Claire Gallimore" <CNPD2@ALLTEL.NET>

"Claire Gallimore" <CNPD2@ALLTEL.NET>
03/10/2003 09:41 AM

To: "Tom Safranek" <tom.safranek@hhss.state.ne.us>
cc:
Subject: Sudanese Refugees/Renal Failure

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Re: SARS Vaccine? - Lotus Notes

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New Memo | Reply | Forward | Delete | Folder | Copy into | Tools

Tom Safranek
04/16/2003 06:27 PM

To: "Claire Gallimore" <CNPD2@ALLTEL.NET>
cc:
Subject: Re: SARS Vaccine?

"Claire Gallimore" <CNPD2@ALLTEL.NET >
04/08/2003 11:34 AM

To: "Tom Safranek" <tom.safranek@hhss.state.ne.us>
cc:
Subject: SARS Vaccine?

Dear Tom:

If Corona virus is ultimately proven to be the cause of SARS syndrome, is it safe to assume that this virus will be incorporated into next year's influenza vaccine?

Sincerely,
Scott P. Liggett, M.D.
Consultative Nephrology
307 North 46th Street
Lincoln, Nebraska 68503
402-466-8259

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Welcome | Tom Safranek - All Docu... | My Personal Addre... | Tom Safranek - Calendar | Sudanese Refuge... | Re: SARS Vaccine?

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Tom Safranek
04/16/2003 06:27 PM

To: "Claire Gallimore" <CNPD2@ALLTEL.NET>
cc:
Subject: Re: SARS Vaccine?

Scott:

I would say we're no where near a vaccine for SARS. Only way to deal with it right now is with infection control precautions. No drugs, no vaccines on the horizon, to my knowledge.

Tom

Thomas J. Safranek, M.D.
State Epidemiologist
Nebraska Health & Human Services
phone: (402) 471-0550
fax: (402) 471-3601

"Claire Gallimore" <CNPD2@ALLTEL.NET>

"Claire Gallimore" <CNPD2@ALLTEL.NET>
04/08/2003 11:34 AM

To: "Tom Safranek" <tom.safranek@hhss.state.ne.us>
cc:
Subject: SARS Vaccine?

Dear Tom:

You have new mail. | Office

HAN Enhancements: Version 2

- self-register
- conduct surveys
- extend access to the HAN to key partners
- the use of GIS to define a target group

Key Challenges

- Identifying our partners
- Organizing our directory content
- Need for administrative rules
- How to collect/maintain quality directory content?

Partners

- Public Health Staff
- Physicians
- Hospitals: ICP, Lab, ER, Resp. therapists
- Veterinarians
- Pharmacists
- Law enforcement
- Occupational Health Nurses
- School Nurses
- School Principals
- Media
- Nursing homes
- Municipal leaders

Key Challenges

- Identifying our partners
- Organizing our directory content
- Need for administrative rules
- How to collect/maintain quality directory content?

Tom Safranek, M.D.

Nebraska State Epidemiologist

tom.safranek@hhss.state.ne.us

402 471 – 0550

Benefits

- Real-time data
- Reduce paperwork
- Fewer errors
- One-time data entry
- Automated reporting
- Distributed access
- Results tracking
- Data warehousing
- HL-7 Data standard
- Platform independent