

## World AIDS Day — December 1, 2011

World AIDS Day draws attention to the current status of the human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) epidemic worldwide. The theme for this year's observance on December 1 is Leading with Science, Uniting for Action.

The first cases of AIDS were reported 30 years ago in the June 5, 1981 issue of *MMWR*. Since then, the epidemic has claimed the lives of nearly 30 million persons worldwide (1), and an estimated 34 million persons currently are living with HIV infection (2).

Global efforts, including the U.S. President's Emergency Plan for AIDS Relief (in which CDC is an implementing partner), have resulted in an estimated 6.6 million persons in low-income and middle-income countries currently receiving antiretroviral therapy for HIV/AIDS at the end of 2010. Compared with 2009, this represents the largest ever annual increase in the number of persons accessing HIV treatment (1.4 million) (2).

In the United States, approximately 575,000 persons diagnosed with AIDS have died since the first cases were reported 30 years ago (3), and approximately 50,000 persons become infected with HIV each year (4). An estimated 1.2 million persons in the United States are living with HIV infection (5).

### References

1. World Health Organization. Global Health Observatory HIV/AIDS data, 2009. Geneva, Switzerland: World Health Organization; 2011.
2. Joint United Nations Programme on HIV/AIDS (UNAIDS). UNAIDS World AIDS Day report, 2011. Geneva, Switzerland: Joint United Nations Programme on HIV/AIDS (UNAIDS); 2011. Available at [http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2011/jc2216\\_worldaidsday\\_report\\_2011\\_en.pdf](http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2011/jc2216_worldaidsday_report_2011_en.pdf). Accessed November 21, 2011.
3. CDC. HIV surveillance report 2009. Vol. 21. Atlanta, GA: US Department of Health and Human Services, CDC; 2011.
4. CDC. HIV surveillance—United States, 1981–2008. *MMWR* 2011;60:689–93.
5. Prejean J, Song R, Hernandez A, et al. Estimated HIV incidence in the United States, 2006–2009. *PLoS One* 2011;6:e17502.

## Progress Toward Strengthening National Blood Transfusion Services — 14 Countries, 2008–2010

In sub-Saharan Africa, transfusion-transmitted human immunodeficiency virus (HIV) infection persists, particularly among women and children, who receive most blood transfusions (1). Providing technical and financial assistance to national blood transfusion services to increase the adequacy of blood collections and to prevent transfusion-transmitted HIV infection continues to be a priority under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). Since 2004, PEPFAR has provided support (including policy guidance, strengthening laboratory capacity, and enhancing recruitment and retention of safe blood donors) to national blood transfusion services in 14 countries\* heavily impacted by HIV. CDC previously has described progress made by these countries during 2003–2007 (2). This report summarizes the results of updated analyses of data collected by national blood transfusion services during 2008–2010 and reported to CDC, which indicated that, since 2007 1) legislative frameworks supporting a national blood policy were established in two countries, are under development in two countries, and are being updated in one country; 2) the number of whole blood units collected had increased in 11 countries; 3) the percentage of collections from voluntary

\*Botswana, Côte d'Ivoire, Ethiopia, Guyana, Haiti, Kenya, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Tanzania, Uganda, and Zambia (2009 Joint United Nations Programme on HIV/AIDS HIV population prevalence estimates among persons aged 15–49 years ranged from 1.2% to 24.8%; additional information available at <http://www.aidsinfoonline.org>). PEPFAR has directly funded national blood transfusion service activities in all 14 countries through CDC cooperative agreements.

### INSIDE

- 1583 Fruit and Vegetable Consumption Among High School Students — United States, 2010
- 1587 Announcements
- 1589 QuickStats



nonremunerated donors<sup>†</sup> had increased in five countries; and 4) the proportion of collected units reactive for HIV<sup>§</sup> had decreased in 12 countries. Countries supported by PEPFAR continue to make progress toward improving safe and adequate supplies of blood. Continued government commitment is critical for ensuring quality, safety, and adequacy of the blood supply and sustaining the national blood transfusion service after eventual transition from PEPFAR support.

In 2008, the most recent year for which global data are available, approximately 92 million blood units were donated worldwide (3). An estimated 4 million (4.3%) of those units were donated in sub-Saharan Africa (3), which has approximately 12% of the global population<sup>¶</sup> and is where blood collections historically have been inadequate to meet clinical demand (4) and inappropriate clinical use of blood further contributes to supply inadequacy (5). Historically, laboratory screening for HIV infection in sub-Saharan Africa also was inconsistent and

not performed in a standardized, quality-assured format (6). Collections were primarily from hospital-based services that relied on family members or paid donors, who typically are at greater risk for HIV infection than voluntary nonremunerated donors and, because of external pressures to donate, might not reveal behavioral risks for HIV during donor selection (7).

To overcome these challenges, the World Health Organization (WHO) has emphasized the need to maintain an adequate supply of safe blood. WHO estimates that resource-limited countries will begin to meet clinical demand if at least 10 whole blood units per 1,000 population are collected annually (8). Furthermore, to improve adequacy of supply and reduce the risk for transfusion-transmitted HIV infection, WHO has recommended that resource-limited countries adopt comprehensive national policies for national blood transfusion services (3). In 2010, WHO revised these recommendations to include a quality systems approach as a fifth key element in addition to the existing four (3).\*\* PEPFAR-supported blood

<sup>†</sup> Persons who donate blood solely for altruistic reasons and who receive no compensation. Designation of voluntary nonremunerated status is determined by blood center staff members based on national blood policy.

<sup>§</sup> National blood transfusion services screen donated blood for markers of HIV infection, which include HIV antibody, and in many countries, p24 antigen. Blood units collected by blood services in South Africa and Namibia are additionally subjected to individual HIV nucleic acid testing. For the purposes of transfusion safety, a reactive result on a screening test excludes a unit from transfusion. For this report, the term "reactive" is used because the additional testing required to confirm a result as positive is not routinely performed by all blood services.

<sup>¶</sup> Based on the 2010 revision of the United Nations Population Division census estimates. Available at [http://esa.un.org/unpd/wpp/unpp/panel\\_profiles.htm](http://esa.un.org/unpd/wpp/unpp/panel_profiles.htm).

\*\* The five key elements of WHO recommendations are: 1) establishment of a nationally coordinated blood transfusion service supported by a legislative framework; 2) collection of blood exclusively from voluntary nonremunerated donors; 3) implementation of universal, quality-assured HIV, hepatitis B and C, and syphilis screening of donor blood; 4) promotion of safe and appropriate use of blood and reduction of unnecessary transfusions; and 5) adoption of quality systems covering the entire transfusion process from donor recruitment to follow-up of recipients. A quality system covers all aspects of blood transfusion, from the recruitment and selection of blood donors to the transfusion of blood and blood products to patients. Key elements include organizational management, standards, documentation, training, and assessment. Additional information available at <http://www.who.int/bloodsafety/quality>.

The *MMWR* series of publications is published by the Office of Surveillance, Epidemiology, and Laboratory Services, Centers for Disease Control and Prevention (CDC), U.S. Department of Health and Human Services, Atlanta, GA 30333.

**Suggested citation:** Centers for Disease Control and Prevention. [Article title]. *MMWR* 2011;60:[inclusive page numbers].

#### Centers for Disease Control and Prevention

Thomas R. Frieden, MD, MPH, *Director*  
 Harold W. Jaffe, MD, MA, *Associate Director for Science*  
 James W. Stephens, PhD, *Director, Office of Science Quality*  
 Stephen B. Thacker, MD, MSc, *Deputy Director for Surveillance, Epidemiology, and Laboratory Services*  
 Stephanie Zaza, MD, MPH, *Director, Epidemiology and Analysis Program Office*

#### MMWR Editorial and Production Staff

Ronald L. Moolenaar, MD, MPH, *Editor, MMWR Series*  
 John S. Moran, MD, MPH, *Deputy Editor, MMWR Series*  
 Robert A. Gunn, MD, MPH, *Associate Editor, MMWR Series*  
 Teresa F. Rutledge, *Managing Editor, MMWR Series*  
 Douglas W. Weatherwax, *Lead Technical Writer-Editor*  
 Donald G. Meadows, MA, Jude C. Rutledge, *Writer-Editors*  
 Martha F. Boyd, *Lead Visual Information Specialist*  
 Maureen A. Leahy, Julia C. Martinroe,  
 Stephen R. Spriggs, Terraye M. Starr  
*Visual Information Specialists*  
 Quang M. Doan, MBA, Phyllis H. King  
*Information Technology Specialists*

#### MMWR Editorial Board

William L. Roper, MD, MPH, Chapel Hill, NC, *Chairman*  
 Virginia A. Caine, MD, Indianapolis, IN  
 Matthew L. Boulton, MD, MPH, Ann Arbor, MI  
 Jonathan E. Fielding, MD, MPH, MBA, Los Angeles, CA  
 David W. Fleming, MD, Seattle, WA  
 William E. Halperin, MD, DrPH, MPH, Newark, NJ  
 King K. Holmes, MD, PhD, Seattle, WA  
 Deborah Holtzman, PhD, Atlanta, GA  
 Timothy F. Jones, MD, Nashville, TN  
 Dennis G. Maki, MD, Madison, WI  
 Patricia Quinlisk, MD, MPH, Des Moines, IA  
 Patrick L. Remington, MD, MPH, Madison, WI  
 Barbara K. Rimer, DrPH, Chapel Hill, NC  
 John V. Rullan, MD, MPH, San Juan, PR  
 William Schaffner, MD, Nashville, TN  
 Anne Schuchat, MD, Atlanta, GA  
 Dixie E. Snider, MD, MPH, Atlanta, GA  
 John W. Ward, MD, Atlanta, GA

safety initiatives are based on these WHO recommendations and have been demonstrated to reduce the risk for transfusion-transmitted HIV while increasing the supply of safe blood (2,9).

Since 2007, CDC has collected and maintained data to support routine monitoring and evaluation of PEPFAR-funded blood safety projects. The resulting blood safety database contains 80 variables related to safety, supply adequacy, and clinical utilization. Data are derived from routine operations at individual centers throughout a country where collection, processing, testing, and distribution occur, and which collectively constitute the national blood transfusion service. Periodically, data are transferred to the national blood transfusion service headquarters in each country. Data are then aggregated annually and shared with CDC, where they are analyzed for ongoing programmatic evaluation.

This report presents a descriptive analysis of data reported by the 14 countries for the period January 2008–December 2010. The four variables selected for analysis and included in this report represent key elements that address blood supply adequacy and transfusion safety outlined by WHO. The variables are 1) the status of a national blood policy and legislative authority for a national blood transfusion service; 2) the percentage of total national blood service whole blood collections from voluntary nonremunerated donors; 3) the total number of national blood service whole blood unit collections and the number of whole blood unit collections per 1000 population based on the 2010 revision of the United Nations Population Division census estimates for 2000–2010<sup>††</sup>; and 4) the percentage of collected whole blood units reactive for HIV. Also included are the Joint United Nations Programme on HIV/AIDS population prevalence estimates among persons aged 15–49 years, who account for the majority of donations in these countries (3) for 2001, 2007, and 2009. In all 14 countries, algorithms for screening donor blood for HIV dictate that units with a reactive HIV test result be discarded and donors be permanently deferred from future donation. Additional testing to confirm HIV infection status for HIV-reactive units is not performed routinely in all countries, although donors are referred for further testing elsewhere.

By 2007, in addition to six countries with existing national blood policies, such policies were established in six additional countries and were in development in one country. In 2010, 12 countries continued to report the presence of a national blood policy, including one country that was revising its existing policy. Since the most recent reporting in 2007, a legislative

#### What is already known on this topic?

In sub-Saharan Africa and other resource-limited settings, transfusion-transmitted human immunodeficiency virus (HIV) infection persists, particularly among women and children. Increasing adequacy of blood collections and prevention of transfusion-transmitted HIV infection continues to be a priority under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).

#### What is added by this report?

This report describes the progress toward strengthening blood transfusion services in 14 countries receiving PEPFAR support. These countries continue to make progress in 1) enacting a legislative framework supporting national blood policy; 2) increasing the number of whole blood unit collections and the proportion of collections from voluntary nonremunerated donors; and 3) decreasing the proportion of collected blood units reactive for HIV.

#### What are the implications for public health practice?

Continued government commitment is critical for reaching goals for quality, safety, and adequacy of the blood supply and for sustaining the national blood transfusion service after eventual transition from PEPFAR support. To enhance sustainability, blood services must emphasize retention of safe blood donors and enhancement of data management and quality systems from blood collection through transfusion.

framework supporting the national blood policy had been enacted in two additional countries.<sup>§§</sup> By 2010, 11 countries had increased total whole blood unit collections relative to 2007, and national blood services in all countries reported increased collections relative to 2003<sup>¶¶</sup> (Table 1). South Africa had already achieved 17.4 whole blood units collected per 1,000 population per year in 2003, and Botswana reached 11 units per 1,000 population in 2005. In both countries, whole blood collections continued to be >10 units per 1,000 population per year through 2010. In 2009, collections by the national blood service in Guyana (10.2 units per 1,000 population) had crossed this threshold, with Namibia (9.7 units per 1,000 population) close to this threshold. Six other countries had increased collection rates per 1,000 population since 2007. In 2010, 11 of the 14 PEPFAR-supported countries continued to have either 100% of collections by national blood services from voluntary non-remunerated donors or an increase in the percentage of collections from these persons in comparison with 2007, including Haiti, despite structural losses from the 2010 earthquake (Table 2). Since 2007, the national blood

<sup>††</sup> The revised United Nations Population Division census estimates result in slight variations in whole blood unit collections per 1,000 population per year for 2003–2007 from the previous 2008 *MMWR* report (2).

<sup>§§</sup> Data on establishment of a national blood policy and enactment of legislative framework supporting the national blood policy in each of the 14 countries are available at <http://www.cdc.gov/globalaids/mmwr>.

<sup>¶¶</sup> Tanzania and Nigeria established a national blood transfusion service in 2004. The first year for which 12 complete months of data were available was 2005.

**TABLE 1. Number of whole blood units collected by national blood transfusion services and units collected per 1,000 population, by country — U.S. President's Emergency Plan for AIDS Relief, 2003–2010**

Country	No. of whole blood units collected							
	2003	2004	2005	2006	2007	2008	2009	2010
Botswana	11,583	13,210	20,643	21,061	22,230	19,733	23,275	20,401
Côte d'Ivoire	67,780	77,972	86,321	86,082	92,193	99,400	95,981	97,433
Ethiopia	17,208	17,941	19,203	21,019	22,220	34,905	38,422	44,686
Guyana	4,008	4,896	4,531	5,192	5,475	7,360	7,700	7,738
Haiti	8,711	9,513	10,823	13,622	17,094	19,646	21,275	14,899
Kenya	40,857	47,661	80,762	113,080	123,787	95,226	124,019	135,563
Mozambique	67,105	69,648	76,667	72,170	79,925	86,323	95,014	105,319
Namibia	17,860	19,154	19,133	18,422	18,309	20,632	21,841	22,277
Nigeria <sup>†</sup>	—	—	1,266	5,519	16,987	23,935	19,966	36,211
Rwanda	30,786	28,777	37,893	38,539	32,543	35,495	40,567	40,982
South Africa <sup>§</sup>	809,322	813,239	805,923	822,950	821,258	852,177	910,948	913,873
Tanzania <sup>†</sup>	—	—	12,597	63,411	109,471	104,046	129,404	95,430
Uganda	102,703	106,996	115,988	122,442	133,585	137,794	163,455	181,064
Zambia	40,616	38,477	61,982	54,308	68,056	82,527	104,004	89,329

\* Based on the 2010 revision of the United Nations Population Division census estimates. Available at [http://esa.un.org/unpd/wpp/unpp/panel\\_profiles.htm](http://esa.un.org/unpd/wpp/unpp/panel_profiles.htm).

<sup>†</sup> Tanzania and Nigeria established a national blood transfusion service in 2004. The first year for which 12 complete months of data were available was 2005.

<sup>§</sup> Includes data on collections from South African National Blood Service and Western Province Blood Service.

**TABLE 1. (Continued) Number of whole blood units collected by national blood transfusion services and units collected per 1,000 population, by country — U.S. President's Emergency Plan for AIDS Relief, 2003–2010**

Country	No. of whole blood units collected per 1,000 population*							
	2003	2004	2005	2006	2007	2008	2009	2010
Botswana	6.3	7.1	11.0	11.1	11.5	10.1	11.8	10.2
Côte d'Ivoire	3.9	4.4	4.8	4.7	4.9	5.2	4.9	4.9
Ethiopia	0.2	0.2	0.3	0.3	0.3	0.4	0.5	0.5
Guyana	5.4	6.6	6.1	6.9	7.3	9.8	10.2	10.3
Haiti	1.0	1.0	1.2	1.4	1.8	2.0	2.2	1.5
Kenya	1.2	1.4	2.3	3.1	3.3	2.5	3.1	3.3
Mozambique	3.4	3.4	3.7	3.4	3.7	3.9	4.2	4.5
Namibia	8.9	9.4	9.2	8.7	8.5	9.4	9.7	9.8
Nigeria <sup>†</sup>	—	—	<0.1	<0.1	0.1	0.2	0.1	0.2
Rwanda	3.5	3.2	4.1	4.1	3.3	3.5	3.9	3.9
South Africa <sup>§</sup>	17.4	17.2	16.9	17.1	16.9	17.3	18.3	18.2
Tanzania <sup>†</sup>	—	—	0.3	1.6	2.7	2.5	3.0	2.1
Uganda	3.8	3.9	4.1	4.2	4.4	4.4	5.0	5.4
Zambia	3.7	3.4	5.4	4.6	5.6	6.6	8.1	6.8

\* Based on the 2010 revision of the United Nations Population Division census estimates. Available at [http://esa.un.org/unpd/wpp/unpp/panel\\_profiles.htm](http://esa.un.org/unpd/wpp/unpp/panel_profiles.htm).

<sup>†</sup> Tanzania and Nigeria established a national blood transfusion service in 2004. The first year for which 12 complete months of data were available was 2005.

<sup>§</sup> Includes data on collections from South African National Blood Service and Western Province Blood Service.

services in 12 countries have reported an overall decrease in the percentage of collected blood units reactive for HIV, despite persistently high HIV population prevalence as estimated by the United Nations (Table 2).

#### Reported by

*Jerry A. Holmberg, PhD, Office of the Assistant Secretary for Health, US Dept of Health and Human Svcs; Sridhar Basavaraju, MD, Christie Reed, MD, Bakary Drammeh, DrPH, Michael Qualls, MPH, Div of Global HIV/AIDS, Center for Global Health, CDC. Corresponding contributor: Sridhar Basavaraju, [sbasavaraju@cdc.gov](mailto:sbasavaraju@cdc.gov), 404-639-8011.*

#### Editorial Note

During the first phase of PEPFAR (2004–2007), the 14 PEPFAR-supported countries made rapid progress in blood safety and adequacy (2). During 2008–2010, incremental progress continued as the second phase of PEPFAR emphasized sustainability and transition to country ownership. Government commitment is critical to reaching the WHO recommendations for quality, safety, and adequacy of the blood supply and sustaining the national blood service after eventual transition from PEPFAR support. Blood services have been encouraged to supplement external donor support by blending public financing and cost-recovery mechanisms to form a template for long-term sustainability.

**TABLE 2. Estimated HIV population prevalence in persons aged 15–49 years, percentage of whole blood units collected by national blood transfusion services from voluntary non-remunerated donors, and percentage of collected units reactive for HIV, by country — U.S. President's Emergency Plan for AIDS Relief, 2003–2010**

Country	HIV population prevalence among persons aged 15–49 yrs (%)			% collections from voluntary nonremunerated donors							
	2001	2007	2009	2003	2004	2005	2006	2007	2008	2009	2010
Botswana	26.3	25.1	24.8	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Côte d'Ivoire	6.5	4.1	3.4	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ethiopia*	—	—	—	38.8	27.5	23.2	28.1	28.4	20.5	29.8	23.5
Guyana	1.4	1.0	1.2	21.7	18.9	26.1	31.2	61.1	54.6	84.0	78.5
Haiti	2.6	2.0	1.9	5.2	5.4	14.9	27.4	51.9	65.8	69.5	83.9
Kenya	8.4	6.4	6.3	99.0	95.3	97.6	98.9	99.5	100.0	100.0	100.0
Mozambique	9.4	11.4	11.5	58.0	58.3	59.6	52.0	72.3	59.7	63.3	61.0
Namibia	16.1	14.3	13.1	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Nigeria†	3.8	3.6	3.6	—	—	100.0	100.0	92.3	80.9	90.1	86.5
Rwanda	3.7	2.9	2.9	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
South Africa§	17.1	18.0	17.8	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Tanzania†	7.1	5.9	5.6	—	—	66.5	80.0	89.2	88.3	93.0	94.9
Uganda	7.0	6.3	6.5	95.5	96.3	99.0	99.9	100.0	100.0	100.0	100.0
Zambia	14.3	13.7	13.5	72.7	71.2	90.6	97.9	99.6	100.0	100.0	100.0

**Abbreviation:** HIV = human immunodeficiency virus.

**Source:** Joint United Nations Programme on HIV/AIDS, 2010 estimates. Available at <http://www.aidsinfoonline.org>.

\* An HIV population prevalence estimate among persons aged 15–49 years is unavailable for Ethiopia. In Ethiopia, reporting on HIV reactivity among collected units began in 2004.

† Tanzania and Nigeria established a national blood transfusion service in 2004. The first year for which 12 complete months of data were available was 2005.

§ Includes data on collections from South African National Blood Service and Western Province Blood Service. Autologous donations and collections from designated donors are reported as donations from voluntary nonremunerated donors.

**TABLE 2. (Continued) Estimated HIV population prevalence in persons aged 15–49 years, percentage of whole blood units collected by national blood transfusion services from voluntary non-remunerated donors, and percentage of collected units reactive for HIV, by country — U.S. President's Emergency Plan for AIDS Relief, 2003–2010**

Country	% collections reactive for HIV							
	2003	2004	2005	2006	2007	2008	2009	2010
Botswana	7.5	5.7	4.0	2.7	2.1	1.7	1.8	1.0
Côte d'Ivoire	1.6	1.4	1.5	1.4	1.2	0.9	0.7	0.5
Ethiopia*	—	3.6	3.4	2.5	3.0	2.9	1.8	1.9
Guyana	0.8	0.6	1.0	0.6	0.3	0.5	0.2	0.2
Haiti	1.7	1.8	1.6	1.9	1.4	1.7	1.4	1.2
Kenya	1.5	1.7	1.9	2.5	1.2	1.5	1.2	1.0
Mozambique	8.6	6.9	6.4	8.3	7.2	6.4	5.3	6.6
Namibia	0.7	0.6	0.6	0.5	0.6	0.5	0.3	0.4
Nigeria†	—	—	3.8	3.5	2.5	1.8	2.2	2.1
Rwanda	1.1	0.1	1.2	0.9	0.5	0.7	0.3	0.3
South Africa§	<0.1	<0.1	<0.1	<0.1	0.1	0.2	0.2	0.2
Tanzania†	—	—	4.8	3.2	2.8	3.3	2.2	1.2
Uganda	2.0	1.9	1.6	1.5	1.3	1.2	0.8	1.0
Zambia	6.9	6.4	9.0	6.4	3.8	4.2	3.5	4.8

**Abbreviation:** HIV = human immunodeficiency virus.

**Source:** Joint United Nations Programme on HIV/AIDS, 2010 estimates. Available at <http://www.aidsinfoonline.org>.

\* An HIV population prevalence estimate among persons aged 15–49 years is unavailable for Ethiopia. In Ethiopia, reporting on HIV reactivity among collected units began in 2004.

† Tanzania and Nigeria established a national blood transfusion service in 2004. The first year for which 12 complete months of data were available was 2005.

§ Includes data on collections from South African National Blood Service and Western Province Blood Service. Autologous donations and collections from designated donors are reported as donations from voluntary nonremunerated donors.

Under the second phase of PEPFAR, in addition to previously established activities, additional emphasis for enhancing sustainability includes retention of safe blood donors, enhancement of data management, and building quality systems. Currently, the majority of blood donations in many of the countries are from first-time rather than repeat donors

(S. Basavaraju and C. Reed; Division of Global HIV/AIDS, Center for Global Health, CDC; personal communication; 2011). The high rates of HIV in these countries continue to present a substantial challenge for blood services in recruiting and retaining safe blood donors. Substantial burdens of anemia, malnutrition, and viral hepatitis further reduce the potential

donor pool and increase the costs of continually identifying additional eligible donors (4). Additionally, data suggest that repeat, voluntary, non-remunerated donors have lower rates of HIV infection than first-time donors, resulting in fewer discards of collected units (10). Blood services are investigating, modifying, or installing upgrades to their existing data management systems to facilitate identification and contact of previous blood donors to encourage repeat donation. These data management systems also will enhance internal monitoring and evaluation capacity to inform evidence-based operational decisions using local data. The development of quality systems to establish procedures, guidelines, and oversight for the entire transfusion process is a sustainability priority. To support quality systems, initiatives include preparing blood services for regional and international accreditation, improvement of national HIV screening algorithms, and coordinated procurement systems.

The findings in this report are subject to at least two limitations. First, the total whole-blood unit collections described in this report do not reflect collections from facilities such as government, private, faith-based, or military hospitals that currently are not incorporated into the national blood service. Consequently, the total and per 1,000 population whole blood unit collections might have been underestimated. Exclusion of collections outside of the national blood service also might have resulted in an overestimate of the proportion of voluntary nonremunerated donors in a country because these facilities might rely on family and replacement donors. Second, national blood services might differ in their level of quality systems implementation, affecting testing proficiency and blood screening algorithms. The sensitivity and specificity of different HIV testing methodologies might have resulted in higher or lower percentages of HIV reactivity among collected units. However, the impact of test characteristics on the results described in this report likely is minimal.

In 2010, PEPFAR blood safety support was reconfigured to include 16 additional countries.<sup>\*\*\*</sup> In addition to sustainability and quality systems indicators, future reports will focus on progress by these countries.

<sup>\*\*\*</sup> Angola, Cambodia, Cameroon, Dominican Republic, Democratic Republic of Congo, Ghana, Kazakhstan, Kyrgyzstan, Lesotho, Mali, Malawi, Swaziland, Tajikistan, Ukraine, Uzbekistan, and Zimbabwe.

## Acknowledgments

National blood transfusion services in Botswana, Côte d'Ivoire, Ethiopia, Guyana, Haiti, Kenya, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Tanzania, Uganda, and Zambia, with support from their respective CDC country offices.

## References

1. Lefrere JJ, Dahourouh H, Dokekias AE, et al. Estimate of the residual risk of transfusion-transmitted human immunodeficiency virus infection in sub-Saharan Africa: a multinational collaborative study. *Transfusion* 2011;51:486–92.
2. CDC. Progress toward strengthening blood transfusion services—14 countries, 2003–2007. *MMWR* 2008;57:1273–7.
3. World Health Organization. Blood safety key global facts and figures in 2011. Geneva, Switzerland: World Health Organization; 2011. Available at [http://www.who.int/worldblooddonorday/media/who\\_blood\\_safety\\_factsheet\\_2011.pdf](http://www.who.int/worldblooddonorday/media/who_blood_safety_factsheet_2011.pdf). Accessed November 15, 2011.
4. World Health Organization. Status of blood safety in the WHO African Region: report of the 2006 survey. Brazzaville, Republic of Congo: World Health Organization; 2006. Available at <http://www.afro.who.int/en/divisions-a-programmes/dsd/health-technologies-a-laboratories.html>. Accessed November 15, 2011.
5. Lackritz EM, Ruebush TK, Zucker JR, et al. Blood transfusion practices and blood-banking services in a Kenyan hospital. *AIDS* 1993;7:995–9.
6. Moore A, Herrera G, Nyamongo J, et al. Estimated risk of HIV transmission by blood transfusion in Kenya. *Lancet* 2001;358:657–60.
7. Kimani D, Mwangi J, Mwangi M, et al. Blood donors in Kenya: a comparison of voluntary and family replacement donors based on a population-based survey. *Vox Sang* 2011;100:212–8.
8. World Health Organization. Blood safety and availability: facts and figures from the 2007 Blood Safety Survey. Geneva, Switzerland: World Health Organization; 2009. Available at <http://www.who.int/mediacentre/factsheets/fs279/en/index.html>. Accessed November 15, 2011.
9. Basavaraju SV, Mwangi J, Nyamongo J, et al. Reduced risk of transfusion-transmitted HIV in Kenya through centrally co-ordinated blood centres, stringent donor selection and effective p24 antigen-HIV antibody screening. *Vox Sang* 2010;99:212–9.
10. Allain JP. Moving on from voluntary non-remunerated donors: who is the best blood donor? *Br J Haematol* 2011 [Epub ahead of print].

## Fruit and Vegetable Consumption Among High School Students — United States, 2010

A diet high in fruits and vegetables is associated with a decreased risk for many chronic diseases and some cancers (1), and can aid in weight management (2). Current daily fruit and vegetable recommendations for adolescents who participate in <30 minutes of physical activity daily are 1.5 cups of fruit and 2.5 cups of vegetables for females and 2 cups of fruit and 3 cups of vegetables for males (1) (1 cup is approximately equal to one medium apple, eight strawberries, 12 baby carrots, or one large tomato).<sup>\*</sup> However, recently published data from the National Health and Nutrition Examination Survey 2003–2004 revealed that consumption was considerably below these levels (3). To assess fruit and vegetable consumption among high school students, CDC analyzed data from the 2010 National Youth Physical Activity and Nutrition Study (NYPANS). This report describes the results of that analysis, which indicated that, in 2010, the median number of times per day that high school students consumed fruits and vegetables was 1.2 for both. For vegetables, the median number of times per day was lower for non-Hispanic black students (1.0) and Hispanic students (1.1) than non-Hispanic white students (1.4). Overall, 28.5% of high school students consumed fruit <1 time daily, and 33.2% of high school students consumed vegetables <1 time daily. The infrequent fruit and vegetable consumption by high school students highlights the need for effective strategies to increase consumption. Policy and environmental approaches to provide greater access to and availability of fruits and vegetables are among the strategies that schools and communities might choose to achieve this goal.

NYPANS includes a school-based survey conducted by CDC in 2010 to measure dietary and physical activity behaviors and behavioral determinants. A nationally representative sample of students in grades 9–12 attending public and private schools was selected using a three-stage cluster sampling design. Students completed an anonymous, self-administered questionnaire in their classrooms during a regular class period. Response rates for schools and students were 82% and 88%, respectively, with an overall response rate<sup>†</sup> of 73%. Data from 11,429 students were available for analysis.

Respondents were asked how many times during the previous 7 days they had consumed the following: fruit, 100%

fruit juice, green salad, potatoes (not including French fries, fried potatoes, or potato chips), carrots, and other vegetables. Response options were as follows: none; 1–3 times or 4–6 times during the previous 7 days; and 1, 2, 3, or 4 or more times per day.<sup>§</sup> The two response options that included a range during the previous 7 days were assigned a value equal to the midpoint and then divided by 7 to determine daily consumption. The response option “4 or more times per day” was assigned a value of 4. Responses to the 100% fruit juice and fruit questions were summed to represent total fruit consumption, and responses to the remaining questions were summed to represent total vegetable consumption. A total of 664 students with missing data for any of the study variables were excluded, resulting in a final sample of 10,765.

Median daily consumption of fruits and vegetables was calculated among students overall and by sex, grade, and race/ethnicity. Linear contrasts were used to test differences in median consumption by demographic characteristic. Race/ethnicity data are presented for non-Hispanic white, non-Hispanic black, Hispanic (of any race) students, and students of other or multiple races. The percentage of students who consumed fruits and vegetables 0 to <1, 1 to <2, 2 to <3, 3 to <4, and ≥4 times daily was calculated among students overall and by race/ethnicity. Data were weighted to provide national estimates, and statistical software was used to account for the complex sample design.

In 2010, the reported median consumption was 1.2 times per day for both fruits and vegetables (Table). Median daily fruit consumption was significantly higher among male (1.4) than female (1.2) students and significantly lower among students in the 10th (1.2) and 12th (1.2) grades than among 9th grade students (1.4).

Although fruit consumption did not differ by race/ethnicity, median daily vegetable consumption was significantly lower

<sup>\*</sup>Additional information available at [http://www.choosemyplate.gov/foodgroups/fruits\\_counts\\_table.html](http://www.choosemyplate.gov/foodgroups/fruits_counts_table.html) and [http://www.choosemyplate.gov/foodgroups/vegetables\\_counts\\_table.html](http://www.choosemyplate.gov/foodgroups/vegetables_counts_table.html).

<sup>†</sup>Overall response rate = (number of participating schools / number of eligible sampled schools) × (number of usable questionnaires / number of eligible students sampled).

<sup>§</sup>NYPANS questions included the following: “During the past 7 days, how many times did you eat fruit? (Do not count fruit juice.)”; “During the past 7 days, how many times did you drink 100% fruit juices such as orange juice, apple juice, or grape juice? (Do not count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)”; “During the past 7 days, how many times did you eat green salad?”; “During the past 7 days, how many times did you eat potatoes? (Do not count French fries, fried potatoes, or potato chips.)”; “During the past 7 days, how many times did you eat carrots?”; “During the past 7 days, how many times did you eat other vegetables? (Do not count green salad, potatoes, or carrots.)” For each question, the response options were as follows: I did not eat [fruit item or vegetable item] (or drink 100% fruit juice) during the past 7 days, “1 to 3 times during the past 7 days,” “4 to 6 times during the past 7 days,” “1 time per day,” “2 times per day,” “3 times per day,” and “4 or more times per day.”

**TABLE. Median number of times per day that high school students consumed fruits and vegetables, by selected characteristics — National Youth Physical Activity and Nutrition Study, United States, 2010**

Characteristic	Weighted % of sample*	Fruits	(IQR)	Vegetables	(IQR)
<b>Overall (N = 10,765)</b>	<b>100.0</b>	<b>1.2</b>	<b>(0.6–2.7)</b>	<b>1.2</b>	<b>(0.7–2.2)</b>
<b>Sex</b>					
Females (referent)	49.9	1.2	(0.6–2.6)	1.3	(0.7–2.2)
Males	50.1	1.4	(0.6–2.9) <sup>†</sup>	1.2	(0.6–2.2)
<b>Grade</b>					
9 (referent)	27.4	1.4	(0.7–3.0)	1.3	(0.6–2.5)
10	25.9	1.2	(0.6–2.7) <sup>†</sup>	1.3	(0.7–2.2)
11	24.0	1.3	(0.6–2.7)	1.3	(0.7–2.2)
12	22.8	1.2	(0.6–2.5) <sup>†</sup>	1.2	(0.6–2.0)
<b>Race/Ethnicity</b>					
White, non-Hispanic (referent)	58.4	1.1	(0.5–2.3)	1.4	(0.8–2.3)
Black, non-Hispanic	14.4	1.2	(0.6–3.4)	1.0	(0.3–2.0) <sup>†</sup>
Hispanic	18.6	1.4	(0.7–3.1)	1.1	(0.4–2.2) <sup>†</sup>
Other/Multiple race	8.6	1.5	(0.6–3.2)	1.5	(0.8–2.3)

**Abbreviation:** IQR = interquartile range.

\* Might not sum to 100% because of rounding.

<sup>†</sup> Significant difference when compared with the referent group ( $p < 0.05$ ).

among non-Hispanic black (1.0) and Hispanic (1.1) students than non-Hispanic white students (1.4) (Table). Median daily vegetable consumption did not vary significantly by sex or grade.

Overall, 28.5% of high school students consumed fruit <1 time daily, and 33.2% consumed vegetables <1 time daily (Figure). Only 16.8% consumed fruit  $\geq 4$  times daily, and 11.2% of students consumed vegetables  $\geq 4$  times daily.

### Reported by

Sonia A. Kim, PhD, Kirsten A. Grimm, MPH, Diane M. Harris, PhD, Kelley S. Scanlon, PhD, Div of Nutrition, Physical Activity, and Obesity; Zewditu Demissie, PhD, EIS Officer, CDC.  
**Corresponding contributor:** Sonia A. Kim, [skim3@cdc.gov](mailto:skim3@cdc.gov), 770-488-5156.

### Editorial Note

The findings in this report indicate that, in 2010, the median number of times per day that U.S. high school students consumed fruits and vegetables was only 1.2 times for both fruits and vegetables and was no higher than 1.5 for any of the demographic subpopulations studied. In addition, 28.5% of students ate fruit <1 time daily, and 33.2% of students ate vegetables <1 time daily. Consumption of vegetables was lowest among non-Hispanic black students and Hispanic students. These results make it likely that the majority of students are not meeting the daily fruit and vegetable recommendations for adolescents participating in <30 minutes of daily physical activity: 1.5 cups of fruit and 2.5 cups of vegetables for females and 2 cups of fruit and 3 cups of vegetables for males. The recommendations are higher for adolescents participating in more physical activity (1).

The infrequent fruit and vegetable consumption by high school students highlights the need for effective strategies to increase consumption. In response to consistently low fruit and vegetable intake in the population, public health agencies have begun to focus on policy and environmental approaches to improve consumption. These approaches are promising because they can have greater reach and might have longer-lasting effects than interventions such as diet counseling and education that focus on individual-level factors (4,5). Policy and environmental approaches can be used to improve fruit and vegetable access and availability, two important factors related to food choices (6).

CDC provides guidance and funding to states, territories, and communities to improve fruit and vegetable access and availability through improvements to retail stores (e.g., providing stores with equipment and training to sell a variety of fruits and vegetables), implementation of farmers' markets, and farm-to-institution policies and programs. ¶ Federal initiatives such as the Let's Move! Initiative,\*\* Know Your Farmer, Know Your Food, †† and Communities Putting Prevention to Work §§ support environmental and policy changes to increase children's access to fruits and vegetables across multiple settings.

Because the majority of high school-aged children attend school, schools can play a prominent role in supporting fruit and vegetable consumption by providing students with fruits

¶ Additional information available at <http://www.cdc.gov/obesity/stateprograms/fundedstates.html>.

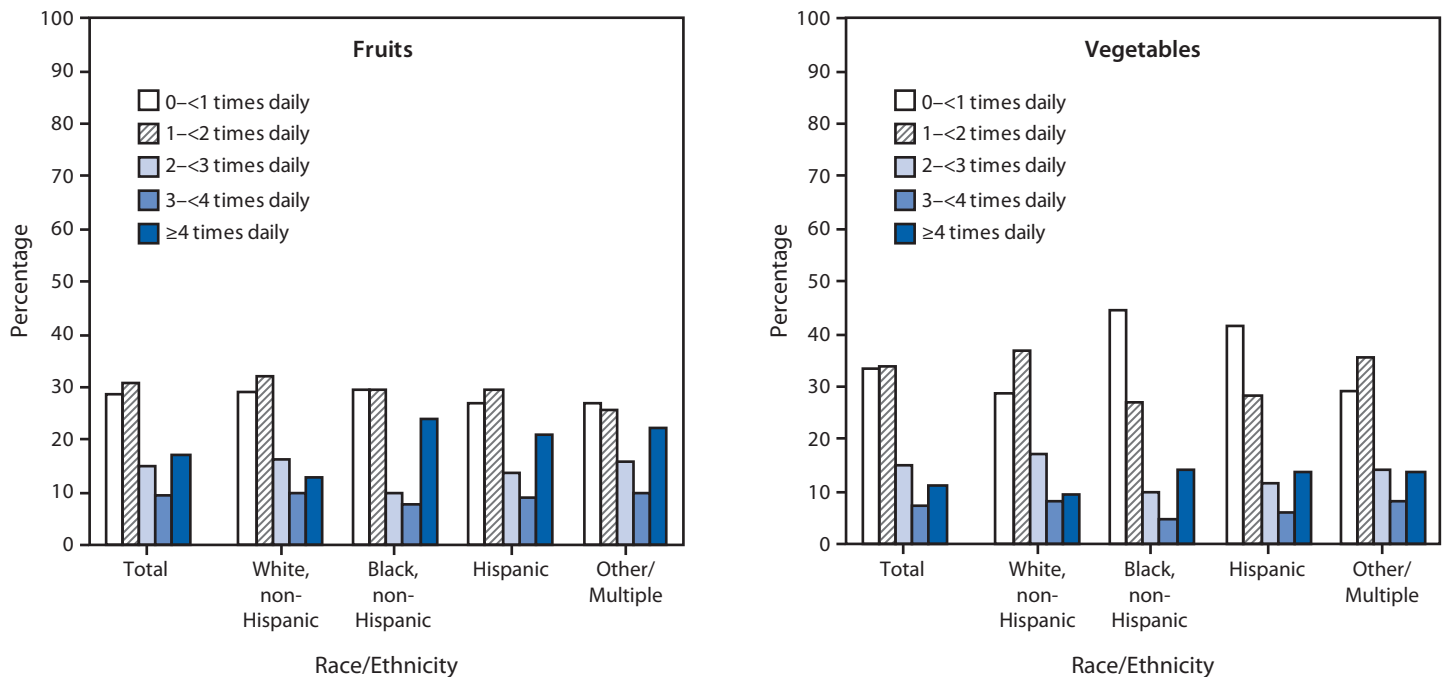
\*\* Additional information available at <http://letsmove.gov>.

†† Additional information available at <http://www.usda.gov/wps/portal/usda/knownyourfarmer?navid=KNOWYOURFARMER>.

§§ Additional information available at <http://www.cdc.gov/healthycommunitiesprogram/communities/cppw/index.htm>.



FIGURE. Percentage of high school students who consumed fruits\* or vegetables,† by number of times daily and race/ethnicity — National Youth Physical Activity and Nutrition Study, United States, 2010



\* Ate fruit or drank 100% fruit juice during the 7 days before the survey.

† Green salad, potatoes (excluding French fries, fried potatoes, or potato chips), carrots, or other vegetables during the 7 days before the survey.

and vegetables and giving students opportunities to learn about and practice healthful eating behaviors. In *School Health Guidelines to Promote Healthy Eating and Physical Activity*, CDC recommends that schools provide access to healthy foods and encourage healthy eating choices (7). Some strategies to achieve these recommendations include salad bars, gardens, farm-to-school programs, and the U.S. Department of Agriculture's Fresh Fruit and Vegetable Program (6,7).<sup>§§</sup> The Let's Move Salad Bars to Schools<sup>\*\*\*</sup> initiative, a partnership of public health organizations (including CDC), school food advocates, and the produce industry, has a goal of placing 6,000 salad bars in schools in 3 years. In addition, proposed changes to the National School Lunch and Breakfast Programs include increasing the amount and variety of fruits and vegetables offered during school meals.<sup>†††</sup> Implementing these strategies at schools can increase students' exposure to and familiarity with fruits and vegetables, factors that influence the development of food preferences (8), which, along with access, are important factors affecting food consumption (6). Also, in keeping with CDC's recommendation that schools partner with communities in the development of healthy eating (7),

schools can encourage students' involvement in farm collaborations, community gardens, and improving the availability of fruits and vegetables at neighborhood stores.<sup>§§§</sup> School and community-based experiences with fruits and vegetables might help improve the food environment, influence students to consume more of these foods (9), and create a lasting impact as adolescents become adults (10).

The findings in this report are subject to at least three limitations. First, because the survey is school-based, the results are representative only of high school students. In 2008, approximately 4% of persons aged 16–17 years nationwide were not enrolled in a high school program or did not have a high school diploma or equivalent credential.<sup>§§§</sup> Second, all results are based on self-report, and students might either overreport or underreport fruit and vegetable consumption because of social desirability or recall bias. Finally, the questionnaire assessed the number of times per day that fruit and vegetables were consumed, not the portion sizes, so direct comparisons cannot be made with dietary recommendations based on cup measurements of fruit and vegetables.

<sup>§§</sup> Additional information available at <http://www.fns.usda.gov/cnd/ffvp>.

<sup>\*\*\*</sup> Additional information available at <http://saladbars2schools.org>.

<sup>†††</sup> Additional information available at <http://www.fns.usda.gov/cnd/governance/regulations/2011-01-13.pdf>.

<sup>§§§</sup> Additional information available at <http://www.thefoodtrust.org/php/programs/Summer2011issuebrief.pdf>.

<sup>§§§</sup> Additional information available at <http://nces.ed.gov/pubs2011/2011012.pdf>.

## References

## What is already known on this topic?

Despite providing health benefits, consumption of fruits and vegetables has been lower than recommended levels for adolescents in the United States.

## What is added by this report?

Based on data from the 2010 National Youth Physical Activity and Nutrition Study, fruit and vegetable consumption among U.S. high school students remains low. In 2010, median consumption was 1.2 times per day for both fruits and vegetables. In addition, about one in four high school students consumed fruit less than once daily, and one in three consumed vegetables less than once daily.

## What are the implications for public health practice?

Policy and environmental approaches to increase fruit and vegetable access and availability at schools include school salad bars, gardens, farm-to-school programs, the U.S. Department of Agriculture's Fresh Fruit and Vegetable Program, and increasing the amount and variety of fruits and vegetables offered during school meals.

Policy and environmental approaches to increase fruit and vegetable access and availability at school and at other sites in the community where students spend time and purchase food are among the strategies that schools and communities might choose to achieve higher consumption of fruits and vegetables among high school students.

1. US Department of Agriculture, US Department of Health and Human Services. Dietary guidelines for Americans, 2010. 7th ed. Washington, DC: US Department of Agriculture, US Department of Health and Human Services; 2010. Available at <http://www.cnpp.usda.gov/dietaryguidelines.htm>. Accessed November 14, 2011.
2. Rolls BJ, Ello-Martin JA, Tohill BC. What can intervention studies tell us about the relationship between fruit and vegetable consumption and weight management? *Nutr Rev* 2004;62:1–17.
3. Kimmons J, Gillespie C, Seymour J, Serdula M, Blanck HM. Fruit and vegetable intake among adolescents and adults in the United States: percentage meeting individualized recommendations. *Medscape J Med* 2009;11:26.
4. Glanz K, Bishop DB. The role of behavioral science theory in development and implementation of public health interventions. *Annu Rev Public Health* 2010;31:399–418.
5. Frieden TR. A framework for public health action: the health impact pyramid. *Am J Public Health* 2010;100:590–5.
6. Story M, Kaphingst KM, Robinson-O'Brien R, Glanz K. Creating healthy food and eating environments: policy and environmental approaches. *Annu Rev Public Health* 2008;29:253–72.
7. CDC. School health guidelines to promote healthy eating and physical activity. *MMWR* 2011;60(No. RR-5).
8. Birch LL. Development of food preferences. *Annu Rev Nutr* 1999;19:41–62.
9. Lautenschlager L, Smith C. Beliefs, knowledge, and values held by inner-city youth about gardening, nutrition, and cooking. *Agriculture and Human Values*. 2007;24:245–58.
10. Devine CM, Wolfe WS, Frongillo EA Jr, Bisogni CA. Life-course events and experiences: association with fruit and vegetable consumption in 3 ethnic groups. *J Am Diet Assoc* 1999;99:309–14.

## Announcements

### Native Diabetes Wellness Program Commemorates Native American Heritage Month — November 2011

November is National Native American Heritage Month. American Indian and Alaska Native (AI/AN) adults are twice as likely to have diagnosed diabetes than non-Hispanic whites (1). Among AI/ANs aged  $\leq 35$  years, age-adjusted rates of diagnosed diabetes doubled from 8.5 per 1,000 population in 1994 to 17.1 in 2004 (2). In 1997, when Congress funded the Indian Health Service's Special Diabetes Program for Indians and CDC's prevention efforts in tribal communities, tribal representatives advised that "our cultures are the source of health."

Research studies have demonstrated that type 2 diabetes can be prevented or delayed with lifestyle interventions that promote weight loss and physical activity in adults at high risk (3). Guided by the Tribal Leaders Diabetes Committee and through a partnership with the Indian Health Service, CDC's Native Diabetes Wellness Program (NDWP) developed a series of four *Eagle Books* for elementary school children about traditional ways of being healthy and preventing type 2 diabetes. The first *Eagle Book* to bring these prevention messages to middle school children, *Coyote and the Turtle's Dream*, will be released this month.

NDWP uses varied methods that are respectful of local cultures and geographic diversity to organize, share data, and evaluate programs that support health practices and policies to sustain a healthier environment. NDWP supports 17 cooperative agreements in tribal communities to increase access to traditional foods, physical activity, and social support. Additional information about NDWP is available at <http://www.cdc.gov/diabetes/projects/diabetes-wellness.htm>.

#### References

1. CDC. National diabetes fact sheet: national estimates and general information on diabetes and prediabetes in the United States, 2011. Atlanta, GA: US Department of Health and Human Services, CDC; 2011.
2. CDC. Diagnosed diabetes among American Indians and Alaska Natives aged  $< 35$  years—United States, 1994–2004. *MMWR* 2006;55:1201–3.
3. Knowler WC, Barrett-Connor E, Fowler SE, et al. Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin. *N Engl J Med* 2002;346:393–403.

### Environmental Microbiology: Control of Foodborne and Waterborne Diseases Course — January 9–13, 2012

CDC and Emory University's Rollins School of Public Health will cosponsor Environmental Microbiology: Control of Foodborne and Waterborne Diseases, on January 9–13, 2012, at Emory University, Rollins School of Public Health. This 5-day course on surveillance of foodborne and waterborne diseases is designed for public health practitioners and other students interested in food and water safety.

The course will describe how disease surveillance information is used to improve public health policy and practice in ways that contribute to food and water safety. Attendees will learn about microorganisms and chemical agents responsible for food and water-transmitted diseases, the diseases they cause, their pathogenesis, clinical manifestations, reservoirs, and modes of transmission, and surveillance systems. The course also will cover the transport, survival, and fate of pathogens in the environment; indicator organisms as surrogates for pathogens; and removal and inactivation of pathogens and indicators by water and wastewater treatment processes. Examples of quality assurance programs, such as Hazard Analysis and Critical Control Points, and their effectiveness in controlling foodborne and waterborne diseases in industrialized and developing countries also will be discussed.

This course is offered to Emory University students and to public health professionals. Tuition will be charged. The application deadline is December 20, 2010, or until all slots have been filled. Additional information and applications are available by mail (Emory University, Hubert Department of Global Health [Attn: Pia Valeriano], 1518 Clifton Rd. NE, Rm. CNR Bldg., room 7038, Atlanta, GA 30322); telephone, (404-727-3485); fax (404-727-4590); online (<http://www.sph.emory.edu/epicourses>) or by e-mail ([pvaleri@emory.edu](mailto:pvaleri@emory.edu)).

## Errata

---

### Vol. 60, No. 39

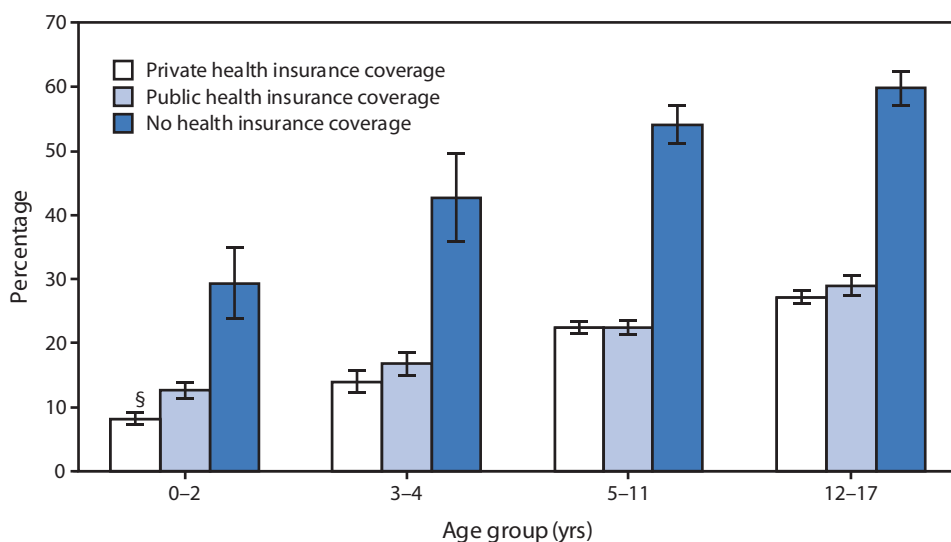
On page 1373, errors appeared in Table II, “Provisional cases of selected notifiable diseases, United States,” in some of the regional cumulative total columns for *Streptococcus pneumoniae*, invasive disease, Age <5. The correct data for the Cum 2010 and Cum 2011 columns, respectively, are as follows: United States: **907** and **1,603**; E.N. Central: **178** and **282**; W.N. Central: **44** and **125**; S. Atlantic: **243** and **429**; E.S. Central: **52** and **86**; W.S. Central: **159** and **228**; and Mountain: **108** and **186**.

The corrected Table II (part 10) is available at [http://wonder.cdc.gov/mmwr/mmwr morb2.asp?mmwr\\_year=2011&mmwr\\_week=39](http://wonder.cdc.gov/mmwr/mmwr morb2.asp?mmwr_year=2011&mmwr_week=39).

## QuickStats

FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

### Percentage of Children Aged $\leq 17$ Years Who Did Not Receive a Well-Child Checkup\* in the Past 12 Months, by Health Insurance Status<sup>†</sup> and Age Group — National Health Interview Survey, United States, 2006–2010



\* Estimates are based on household interviews of a sample of the civilian, noninstitutionalized U.S. population. One child aged  $\leq 17$  years was randomly selected per family; a parent or other knowledgeable adult provided information for the child. Information on well-child checkups was obtained from a question that asked, "During the past 12 months, did [child] receive a well-child check-up, that is a general check-up, when [he/she] was not sick or injured?" Unknowns with respect to well-child checkups and health insurance status were excluded from the denominators.

<sup>†</sup> Health insurance status indicates coverage at the time of interview. Public coverage includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plans, Medicare (disability), or military health plans (TRICARE, VA, or CHAMP-VA). Children with both public and private insurance coverage were included in the private coverage category.

<sup>§</sup> 95% confidence interval.

The percentage of children aged  $\leq 17$  years who did not receive a well-child checkup was two to three times higher for children with no health insurance coverage compared with children with public or private coverage. Among children aged 0–2 years and 3–4 years, those with public health insurance coverage were more likely to lack a well-child checkup compared with those with private health insurance coverage. Among older children, little difference was observed between children with public or private health insurance. Overall, for each type of health insurance coverage, the percentage of children who did not receive a well-child checkup increased with age.

Source: National Health Interview Survey, 2006–2010. Available at <http://www.cdc.gov/nchs/nhis.htm>.

## Notifiable Diseases and Mortality Tables

TABLE I. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending November 19, 2011 (46th week)\*

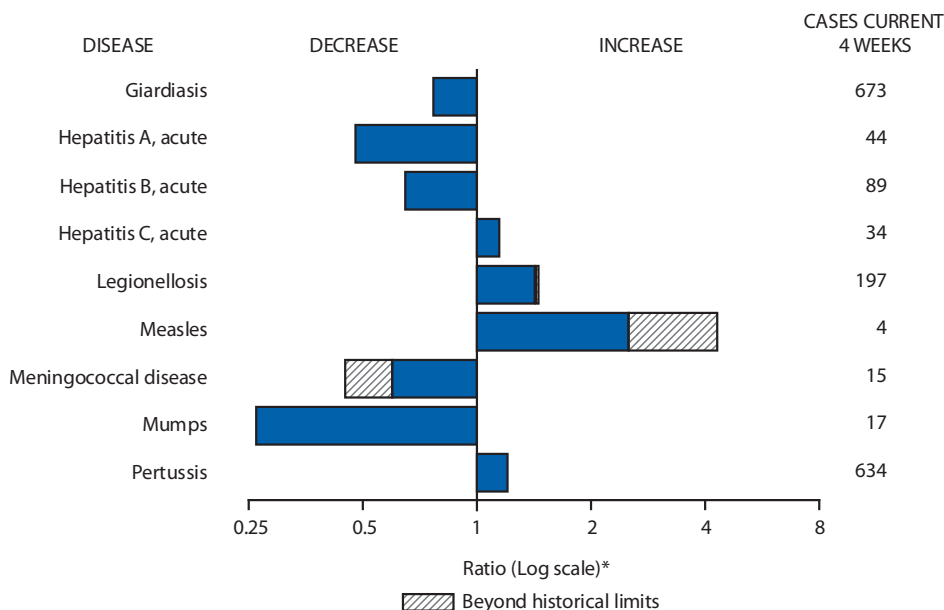
Disease	Current week	Cum 2011	5-year weekly average <sup>†</sup>	Total cases reported for previous years					States reporting cases during current week (No.)
				2010	2009	2008	2007	2006	
Anthrax	—	1	—	—	1	—	1	1	
Arboviral diseases <sup>§, ¶</sup> :									
California serogroup virus disease	—	117	0	75	55	62	55	67	
Eastern equine encephalitis virus disease	—	3	—	10	4	4	4	8	
Powassan virus disease	—	14	0	8	6	2	7	1	
St. Louis encephalitis virus disease	—	3	0	10	12	13	9	10	
Western equine encephalitis virus disease	—	—	—	—	—	—	—	—	
Babesiosis	2	598	0	NN	NN	NN	NN	NN	NY (1), PA (1)
Botulism, total	—	102	3	112	118	145	144	165	
foodborne	—	8	0	7	10	17	32	20	
infant	—	66	2	80	83	109	85	97	
other (wound and unspecified)	—	28	1	25	25	19	27	48	
Brucellosis	—	68	2	115	115	80	131	121	
Chancroid	—	26	1	24	28	25	23	33	
Cholera	—	29	0	13	10	5	7	9	
Cyclosporiasis <sup>§</sup>	1	141	1	179	141	139	93	137	NC (1)
Diphtheria	—	—	—	—	—	—	—	—	
<i>Haemophilus influenzae</i> ,** invasive disease (age <5 yrs):									
serotype b	—	6	0	23	35	30	22	29	
nonsensory type b	—	94	4	200	236	244	199	175	
unknown serotype	—	201	4	223	178	163	180	179	
Hansen disease <sup>§</sup>	—	40	1	98	103	80	101	66	
Hantavirus pulmonary syndrome <sup>§</sup>	—	19	0	20	20	18	32	40	
Hemolytic uremic syndrome, postdiarrheal <sup>§</sup>	1	168	4	266	242	330	292	288	MO (1)
Influenza-associated pediatric mortality <sup>§, ††</sup>	2	114	5	61	358	90	77	43	CA (2)
Listeriosis	9	654	14	821	851	759	808	884	NY (1), PA (1), FL (3), OK (1), ID (1), CA (1), HI (1)
Measles <sup>§§</sup>	—	205	0	63	71	140	43	55	
Meningococcal disease, invasive¶¶:									
A, C, Y, and W-135	—	163	5	280	301	330	325	318	
serogroup B	1	88	3	135	174	188	167	193	WA (1)
other serogroup	—	10	0	12	23	38	35	32	
unknown serogroup	3	331	9	406	482	616	550	651	PA (1), MO (1), FL (1)
Novel influenza A virus infections***	—	8	0	4	43,774	2	4	NN	
Plague	—	2	0	2	8	3	7	17	
Poliomyelitis, paralytic	—	—	—	—	1	—	—	—	
Polio virus Infection, nonparalytic <sup>§</sup>	—	—	—	—	—	—	—	NN	
Psittacosis <sup>§</sup>	—	2	0	4	9	8	12	21	
Q fever, total <sup>§</sup>	—	93	2	131	113	120	171	169	
acute	—	70	1	106	93	106	—	—	
chronic	—	23	0	25	20	14	—	—	
Rabies, human	—	2	0	2	4	2	1	3	
Rubella <sup>†††</sup>	—	4	0	5	3	16	12	11	
Rubella, congenital syndrome	—	—	—	—	2	—	—	1	
SARS-CoV <sup>§</sup>	—	—	—	—	—	—	—	—	
Smallpox <sup>§</sup>	—	—	—	—	—	—	—	—	
Streptococcal toxic-shock syndrome <sup>§</sup>	—	95	1	142	161	157	132	125	
Syphilis, congenital (age <1 yr) <sup>§§§</sup>	—	204	7	377	423	431	430	349	
Tetanus	—	8	0	26	18	19	28	41	
Toxic-shock syndrome (staphylococcal) <sup>§</sup>	2	64	1	82	74	71	92	101	NY (1), PA (1)
Trichinellosis	—	9	0	7	13	39	5	15	
Tularemia	3	133	1	124	93	123	137	95	OK (1), WA (2)
Typhoid fever	—	315	5	467	397	449	434	353	
Vancomycin-intermediate <i>Staphylococcus aureus</i> <sup>§</sup>	—	57	1	91	78	63	37	6	
Vancomycin-resistant <i>Staphylococcus aureus</i> <sup>§</sup>	—	—	—	2	1	—	2	1	
Vibriosis (noncholera <i>Vibrio</i> species infections) <sup>§</sup>	3	672	8	846	789	588	549	NN	VA (1), FL (1), WA (1)
Viral hemorrhagic fever¶¶¶	—	—	—	1	NN	NN	NN	NN	
Yellow fever	—	—	—	—	—	—	—	—	

See Table 1 footnotes on next page.

**TABLE I. (Continued) Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending November 19, 2011 (46th week)\***

—: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts.  
 \* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/files/ProvisionalNationa%20NotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/files/ProvisionalNationa%20NotifiableDiseasesSurveillanceData20100927.pdf).  
 † Calculated by summing the incidence counts for the current week, the 2 weeks preceding the current week, and the 2 weeks following the current week, for a total of 5 preceding years. Additional information is available at [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/files/5yearweeklyaverage.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/files/5yearweeklyaverage.pdf).  
 ‡ Not reportable in all states. Data from states where the condition is not reportable are excluded from this table except starting in 2007 for the arboviral diseases, STD data, TB data, and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/infdis.htm](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/infdis.htm).  
 ¶ Includes both neuroinvasive and nonneuroinvasive. Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for West Nile virus are available in Table II.  
 \*\* Data for H. influenzae (all ages, all serotypes) are available in Table II.  
 †† Updated weekly from reports to the Influenza Division, National Center for Immunization and Respiratory Diseases. Since October 2, 2010, no influenza-associated pediatric deaths occurring during the 2011-12 influenza season have been reported.  
 ‡‡ No measles cases were reported for the current week.  
 ¶¶ Data for meningococcal disease (all serogroups) are available in Table II.  
 \*\*\* CDC discontinued reporting of individual confirmed and probable cases of 2009 pandemic influenza A (H1N1) virus infections on July 24, 2009. During 2009, four cases of human infection with novel influenza A viruses, different from the 2009 pandemic influenza A (H1N1) strain, were reported to CDC. The four cases of novel influenza A virus infection reported to CDC during 2010, and the eight cases reported during 2011, were identified as swine influenza A (H3N2) virus and are unrelated to the 2009 pandemic influenza A (H1N1) virus. Total case counts are provided by the Influenza Division, National Center for Immunization and Respiratory Diseases (NCIRD).  
 ††† No rubella cases were reported for the current week.  
 §§§ Updated weekly from reports to the Division of STD Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention.  
 ¶¶¶ There was one case of viral hemorrhagic fever reported during week 12 of 2010. The one case report was confirmed as lassa fever. See Table II for dengue hemorrhagic fever.

**FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals November 19, 2011, with historical data**



\* Ratio of current 4-week total to mean of 15 4-week totals (from previous, comparable, and subsequent 4-week periods for the past 5 years). The point where the hatched area begins is based on the mean and two standard deviations of these 4-week totals.

**Notifiable Disease Data Team and 122 Cities Mortality Data Team**

Jennifer Ward	Deborah A. Adams
Willie J. Anderson	Lenee Blanton
Rosaline Dhara	Diana Harris Onweh
Pearl C. Sharp	Michael S. Wodajo

Morbidity and Mortality Weekly Report

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	<i>Chlamydia trachomatis</i> infection					Coccidioidomycosis					Cryptosporidiosis				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
		Med	Max				Med	Max				Med	Max		
<b>United States</b>	11,031	26,552	31,142	1,170,394	1,151,231	83	372	571	17,043	NN	57	128	366	7,387	8,247
<b>New England</b>	318	860	2,043	38,668	37,093	—	0	1	1	NN	1	7	22	350	455
Connecticut	169	213	1,557	9,228	10,038	—	0	0	—	NN	—	1	9	63	77
Maine†	—	58	100	2,703	2,284	—	0	0	—	NN	1	1	4	44	92
Massachusetts	—	427	860	19,379	18,483	—	0	0	—	NN	—	3	7	147	152
New Hampshire	3	56	91	2,443	2,151	—	0	1	1	NN	—	1	5	55	52
Rhode Island†	104	79	154	3,617	3,038	—	0	0	—	NN	—	0	1	1	16
Vermont†	42	26	84	1,298	1,099	—	0	0	—	NN	—	1	5	40	66
<b>Mid. Atlantic</b>	1,655	3,397	5,069	150,809	152,788	—	0	1	5	NN	4	15	41	784	789
New Jersey	177	545	1,071	26,640	23,401	—	0	0	—	NN	—	0	3	22	49
New York (Upstate)	790	714	2,099	31,978	30,644	—	0	0	—	NN	2	4	15	202	199
New York City	230	1,133	2,468	46,425	56,477	—	0	0	—	NN	—	1	6	77	92
Pennsylvania	458	981	1,239	45,766	42,266	—	0	1	5	NN	2	9	26	483	449
<b>E.N. Central</b>	1,053	4,042	7,039	176,706	182,522	—	0	5	43	NN	18	32	142	2,283	2,272
Illinois	24	1,091	1,320	46,230	53,991	—	0	0	—	NN	—	3	26	190	314
Indiana	—	498	3,376	23,304	17,865	—	0	0	—	NN	—	4	14	180	263
Michigan	684	939	1,429	43,170	44,184	—	0	3	26	NN	—	6	14	303	305
Ohio	155	1,001	1,134	44,004	45,767	—	0	3	17	NN	18	10	95	1,043	438
Wisconsin	190	461	559	19,998	20,715	—	0	0	—	NN	—	8	61	567	952
<b>W.N. Central</b>	138	1,459	1,741	63,999	64,628	—	0	2	6	NN	10	18	87	1,195	1,775
Iowa	14	212	253	9,477	9,462	—	0	0	—	NN	—	6	19	330	373
Kansas	2	204	288	9,101	8,658	—	0	0	—	NN	—	0	10	38	102
Minnesota	—	279	369	11,892	13,779	—	0	0	—	NN	—	0	4	—	383
Missouri	—	529	759	23,330	23,274	—	0	0	—	NN	9	4	63	496	534
Nebraska†	122	112	216	5,622	4,521	—	0	2	6	NN	1	4	12	170	249
North Dakota	—	41	77	1,739	2,090	—	0	0	—	NN	—	0	12	28	30
South Dakota	—	63	93	2,838	2,844	—	0	0	—	NN	—	2	13	133	104
<b>S. Atlantic</b>	5,581	5,357	6,699	249,885	229,432	—	0	2	4	NN	5	21	37	989	966
Delaware	134	86	128	3,884	3,893	—	0	0	—	NN	—	0	1	7	7
District of Columbia	74	109	191	4,937	4,974	—	0	0	—	NN	—	0	1	5	8
Florida	928	1,494	1,698	67,561	67,246	—	0	0	—	NN	3	8	17	397	357
Georgia	803	1,012	2,384	45,437	38,972	—	0	0	—	NN	1	5	11	242	245
Maryland†	—	473	1,125	21,213	21,723	—	0	2	4	NN	—	1	6	60	37
North Carolina	1,390	944	1,688	46,603	37,910	—	0	0	—	NN	—	0	13	36	86
South Carolina†	606	521	946	25,347	23,614	—	0	0	—	NN	1	2	8	117	113
Virginia†	1,590	659	1,143	31,189	27,643	—	0	0	—	NN	—	2	8	109	96
West Virginia	56	79	121	3,714	3,457	—	0	0	—	NN	—	0	5	16	17
<b>E.S. Central</b>	526	1,896	3,314	85,066	81,195	—	0	0	—	NN	1	6	13	275	322
Alabama†	—	536	1,566	25,540	23,926	—	0	0	—	NN	—	2	7	120	167
Kentucky	232	301	2,352	14,474	12,926	—	0	0	—	NN	—	1	2	30	80
Mississippi	35	403	696	17,939	18,818	—	0	0	—	NN	—	1	4	44	24
Tennessee†	259	598	755	27,113	25,525	—	0	0	—	NN	1	1	6	81	51
<b>W.S. Central</b>	523	3,566	4,572	155,615	158,066	—	0	1	5	NN	15	7	62	494	483
Arkansas†	323	305	440	14,205	13,795	—	0	0	—	NN	—	0	2	23	32
Louisiana	200	449	1,052	19,235	24,532	—	0	1	5	NN	—	0	9	43	64
Oklahoma	—	349	1,340	16,378	12,623	—	0	0	—	NN	4	1	34	79	80
Texas†	—	2,449	3,107	105,797	107,116	—	0	0	—	NN	11	5	37	349	307
<b>Mountain</b>	967	1,743	2,155	78,680	74,230	73	292	458	13,410	NN	2	10	30	535	569
Arizona	—	539	726	25,058	24,034	73	288	455	13,261	NN	—	1	4	37	38
Colorado	699	404	847	20,937	17,717	—	0	0	—	NN	2	2	12	142	130
Idaho†	116	80	235	3,631	3,568	—	0	0	—	NN	—	2	9	99	98
Montana†	56	63	87	2,972	2,759	—	0	2	5	NN	—	1	6	71	47
Nevada†	—	201	380	9,126	8,730	—	2	5	87	NN	—	0	2	11	38
New Mexico†	81	215	1,183	9,662	9,629	—	0	4	44	NN	—	2	8	114	125
Utah	—	126	181	5,629	5,952	—	0	2	10	NN	—	0	5	38	66
Wyoming†	15	38	90	1,665	1,841	—	0	2	3	NN	—	0	5	23	27
<b>Pacific</b>	270	3,908	6,559	170,966	171,277	10	80	143	3,569	NN	1	11	29	482	616
Alaska	—	115	157	5,116	5,430	—	0	0	—	NN	—	0	3	14	5
California	270	2,952	5,763	130,531	131,404	10	79	143	3,562	NN	—	6	19	288	335
Hawaii	—	101	135	4,291	5,409	—	0	0	—	NN	—	0	0	—	1
Oregon	—	279	524	11,611	10,021	—	0	1	7	NN	—	2	8	111	200
Washington	—	436	672	19,417	19,013	—	0	0	—	NN	1	1	9	69	75
<b>Territories</b>															
American Samoa	—	0	0	—	—	—	0	0	—	NN	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	NN	—	—	—	—	—
Guam	—	12	62	189	843	—	0	0	—	NN	—	0	0	—	—
Puerto Rico	130	104	349	4,779	5,490	—	0	0	—	NN	N	0	0	N	N
U.S. Virgin Islands	—	16	27	642	512	—	0	0	—	NN	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

† Contains data reported through the National Electronic Disease Surveillance System (NEDSS).



Morbidity and Mortality Weekly Report

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Dengue Virus Infection†									
	Dengue Fever§					Dengue Hemorrhagic Fever¶				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
	Med	Max				Med	Max			
<b>United States</b>	—	3	16	184	667	—	0	1	2	10
<b>New England</b>	—	0	1	2	9	—	0	0	—	—
Connecticut	—	0	0	—	—	—	0	0	—	—
Maine**	—	0	1	—	5	—	0	0	—	—
Massachusetts	—	0	0	—	—	—	0	0	—	—
New Hampshire	—	0	0	—	—	—	0	0	—	—
Rhode Island**	—	0	0	—	1	—	0	0	—	—
Vermont**	—	0	1	2	3	—	0	0	—	—
<b>Mid. Atlantic</b>	—	1	6	55	219	—	0	0	—	5
New Jersey	—	0	1	—	29	—	0	0	—	—
New York (Upstate)	—	0	1	—	30	—	0	0	—	2
New York City	—	0	4	40	139	—	0	0	—	3
Pennsylvania	—	0	2	15	21	—	0	0	—	—
<b>E.N. Central</b>	—	0	2	12	66	—	0	1	1	1
Illinois	—	0	2	2	21	—	0	1	1	—
Indiana	—	0	1	2	14	—	0	0	—	—
Michigan	—	0	1	2	9	—	0	0	—	—
Ohio	—	0	1	2	16	—	0	0	—	—
Wisconsin	—	0	2	4	6	—	0	0	—	1
<b>W.N. Central</b>	—	0	2	11	32	—	0	1	—	1
Iowa	—	0	1	3	2	—	0	0	—	—
Kansas	—	0	1	1	4	—	0	0	—	—
Minnesota	—	0	1	5	14	—	0	0	—	—
Missouri	—	0	1	1	4	—	0	0	—	—
Nebraska**	—	0	0	—	7	—	0	0	—	—
North Dakota	—	0	1	1	1	—	0	0	—	—
South Dakota	—	0	0	—	—	—	0	1	—	1
<b>S. Atlantic</b>	—	1	8	71	232	—	0	1	1	2
Delaware	—	0	2	2	—	—	0	0	—	—
District of Columbia	—	0	0	—	—	—	0	0	—	—
Florida	—	1	7	52	184	—	0	0	—	2
Georgia	—	0	1	3	11	—	0	0	—	—
Maryland**	—	0	2	4	—	—	0	0	—	—
North Carolina	—	0	1	2	8	—	0	0	—	—
South Carolina**	—	0	1	1	13	—	0	0	—	—
Virginia**	—	0	1	7	14	—	0	1	1	—
West Virginia	—	0	0	—	2	—	0	0	—	—
<b>E.S. Central</b>	—	0	3	4	7	—	0	0	—	—
Alabama**	—	0	1	2	4	—	0	0	—	—
Kentucky	—	0	0	—	2	—	0	0	—	—
Mississippi	—	0	0	—	—	—	0	0	—	—
Tennessee**	—	0	2	2	1	—	0	0	—	—
<b>W.S. Central</b>	—	0	2	9	28	—	0	0	—	1
Arkansas**	—	0	0	—	—	—	0	0	—	1
Louisiana	—	0	1	3	4	—	0	0	—	—
Oklahoma	—	0	1	—	5	—	0	0	—	—
Texas**	—	0	1	6	19	—	0	0	—	—
<b>Mountain</b>	—	0	2	4	22	—	0	0	—	—
Arizona	—	0	2	2	10	—	0	0	—	—
Colorado	—	0	0	—	—	—	0	0	—	—
Idaho**	—	0	0	—	3	—	0	0	—	—
Montana**	—	0	0	—	4	—	0	0	—	—
Nevada**	—	0	1	1	4	—	0	0	—	—
New Mexico**	—	0	0	—	1	—	0	0	—	—
Utah	—	0	1	1	—	—	0	0	—	—
Wyoming**	—	0	0	—	—	—	0	0	—	—
<b>Pacific</b>	—	0	4	16	52	—	0	0	—	—
Alaska	—	0	0	—	1	—	0	0	—	—
California	—	0	2	5	35	—	0	0	—	—
Hawaii	—	0	4	5	—	—	0	0	—	—
Oregon	—	0	0	—	—	—	0	0	—	—
Washington	—	0	1	6	16	—	0	0	—	—
<b>Territories</b>										
American Samoa	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	26	80	1,197	10,367	—	0	3	18	234
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phps/files/ProvisionalNationa%20NotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phps/files/ProvisionalNationa%20NotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

† Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance).

§ Dengue Fever includes cases that meet criteria for Dengue Fever with hemorrhage, other clinical and unknown case classifications.

¶ DHF includes cases that meet criteria for dengue shock syndrome (DSS), a more severe form of DHF.

\*\* Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Morbidity and Mortality Weekly Report

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Ehrlichiosis/Anaplasmosis†														
	<i>Ehrlichia chaffeensis</i>					<i>Anaplasma phagocytophilum</i>					Undetermined				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
	Med	Max				Med	Max				Med	Max			
<b>United States</b>	2	7	109	645	609	4	16	56	670	1,655	1	1	13	96	85
<b>New England</b>	—	0	2	4	7	1	2	26	226	103	—	0	1	1	2
Connecticut	—	0	0	—	—	—	0	5	—	32	—	0	0	—	—
Maine <sup>§</sup>	—	0	1	1	4	—	0	2	16	17	—	0	0	—	—
Massachusetts	—	0	0	—	—	—	1	17	150	—	—	0	0	—	—
New Hampshire	—	0	1	2	2	—	0	4	15	19	—	0	1	1	2
Rhode Island <sup>§</sup>	—	0	1	1	1	—	0	15	40	33	—	0	0	—	—
Vermont <sup>§</sup>	—	0	0	—	—	1	0	1	5	2	—	0	0	—	—
<b>Mid. Atlantic</b>	—	1	7	56	82	2	5	31	305	245	—	0	2	9	12
New Jersey	—	0	1	—	49	—	0	3	—	66	—	0	0	—	1
New York (Upstate)	—	0	7	45	26	2	4	27	260	167	—	0	2	9	8
New York City	—	0	2	11	5	—	0	5	41	11	—	0	0	—	—
Pennsylvania	—	0	0	—	2	—	0	1	4	1	—	0	0	—	3
<b>E.N. Central</b>	—	0	3	27	42	—	0	8	18	500	—	0	5	41	44
Illinois	—	0	2	17	16	—	0	2	8	9	—	0	1	2	3
Indiana	—	0	0	—	—	—	0	0	—	—	—	0	3	32	15
Michigan	—	0	2	4	2	—	0	0	—	4	—	0	2	5	—
Ohio	—	0	1	6	6	—	0	1	7	2	—	0	1	1	—
Wisconsin	—	0	1	—	18	—	0	7	3	485	—	0	1	1	26
<b>W.N. Central</b>	—	1	19	155	119	—	0	20	34	724	—	0	11	14	10
Iowa	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
Kansas	—	0	1	3	6	—	0	1	2	1	—	0	0	—	—
Minnesota	—	0	12	—	—	—	0	20	1	711	—	0	11	—	—
Missouri	—	1	19	150	111	—	0	7	28	12	—	0	7	13	10
Nebraska <sup>§</sup>	—	0	1	1	2	—	0	1	1	—	—	0	1	1	—
North Dakota	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
South Dakota	—	0	1	1	—	—	0	1	2	—	—	0	0	—	—
<b>S. Atlantic</b>	2	2	33	227	244	1	1	8	62	58	1	0	1	10	6
Delaware	—	0	2	15	17	—	0	1	1	4	—	0	0	—	—
District of Columbia	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
Florida	1	0	3	15	8	1	0	3	10	3	—	0	0	—	—
Georgia	—	0	3	17	20	—	0	2	7	1	—	0	1	1	1
Maryland <sup>§</sup>	—	0	3	28	21	—	0	2	7	14	1	0	0	1	2
North Carolina	—	0	17	59	96	—	0	6	20	24	—	0	0	—	—
South Carolina <sup>§</sup>	—	0	1	1	4	—	0	0	—	1	—	0	1	1	—
Virginia <sup>§</sup>	1	1	13	92	75	—	0	3	17	11	—	0	1	6	3
West Virginia	—	0	0	—	3	—	0	0	—	—	—	0	1	1	—
<b>E.S. Central</b>	—	0	8	70	87	—	0	2	15	20	—	0	3	14	8
Alabama <sup>§</sup>	—	0	2	4	11	—	0	1	4	7	N	0	0	N	N
Kentucky	—	0	3	12	16	—	0	0	—	—	—	0	0	—	1
Mississippi	—	0	1	3	3	—	0	1	1	2	—	0	0	—	1
Tennessee <sup>§</sup>	—	0	5	51	57	—	0	2	10	11	—	0	3	14	6
<b>W.S. Central</b>	—	0	87	106	27	—	0	9	7	5	—	0	0	—	1
Arkansas <sup>§</sup>	—	0	13	48	9	—	0	2	5	2	—	0	0	—	—
Louisiana	—	0	0	—	1	—	0	0	—	—	—	0	0	—	—
Oklahoma	—	0	82	57	14	—	0	7	2	2	—	0	0	—	—
Texas <sup>§</sup>	—	0	1	1	3	—	0	1	—	1	—	0	0	—	1
<b>Mountain</b>	—	0	0	—	—	—	0	0	—	—	—	0	1	5	—
Arizona	—	0	0	—	—	—	0	0	—	—	—	0	1	4	—
Colorado	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
Idaho <sup>§</sup>	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
Montana <sup>§</sup>	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
Nevada <sup>§</sup>	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
New Mexico <sup>§</sup>	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
Utah	—	0	0	—	—	—	0	0	—	—	—	0	1	1	—
Wyoming <sup>§</sup>	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
<b>Pacific</b>	—	0	1	—	1	—	0	1	3	—	—	0	1	2	2
Alaska	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
California	—	0	1	—	1	—	0	0	—	—	—	0	1	2	2
Hawaii	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
Oregon	—	0	0	—	—	—	0	1	3	—	—	0	0	—	—
Washington	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
<b>Territories</b>															
American Samoa	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
Puerto Rico	N	0	0	N	N	N	0	0	N	N	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/ndss/pdfs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/ndss/pdfs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

† Cumulative total *E. ewingii* cases reported for year 2011 = 13.

§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Giardiasis					Gonorrhea					Haemophilus influenzae, invasive† All ages, all serotypes				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
		Med	Max				Med	Max				Med	Max		
<b>United States</b>	160	289	445	13,338	17,795	2,770	6,053	7,484	267,920	271,897	28	65	141	2,732	2,662
<b>New England</b>	4	27	62	1,352	1,512	28	106	206	4,728	4,878	—	4	12	191	167
Connecticut	—	4	9	195	263	22	45	150	2,024	2,133	—	1	6	50	40
Maine <sup>§</sup>	—	3	10	163	197	—	4	17	220	146	—	0	2	24	11
Massachusetts	—	12	27	622	656	—	47	80	2,036	2,150	—	2	6	89	85
New Hampshire	—	2	8	105	149	2	2	7	112	138	—	0	2	13	11
Rhode Island <sup>§</sup>	—	1	10	65	74	4	6	16	293	263	—	0	2	9	12
Vermont <sup>§</sup>	4	3	19	202	173	—	0	8	43	48	—	0	3	6	8
<b>Mid. Atlantic</b>	52	57	103	2,652	3,028	377	771	1,074	34,899	32,393	7	14	32	621	509
New Jersey	—	3	14	135	437	55	153	258	7,314	5,178	—	2	7	87	92
New York (Upstate)	39	20	72	1,048	1,050	152	114	271	5,145	5,068	4	3	18	159	137
New York City	5	16	29	760	840	70	246	469	10,640	10,846	—	3	7	146	83
Pennsylvania	8	16	29	709	701	100	257	365	11,800	11,301	3	5	11	229	197
<b>E.N. Central</b>	17	47	73	2,113	2,979	351	1,026	2,091	46,541	50,364	4	11	22	479	443
Illinois	—	9	19	382	635	9	278	362	11,907	13,964	—	3	10	132	155
Indiana	—	5	11	189	364	—	119	1,018	5,639	5,055	—	2	7	84	92
Michigan	2	10	20	454	635	258	239	499	11,182	12,168	—	1	4	63	31
Ohio	14	16	30	713	770	38	309	398	13,846	14,691	4	3	7	144	105
Wisconsin	1	8	17	375	575	46	92	119	3,967	4,486	—	1	5	56	60
<b>W.N. Central</b>	11	22	50	1,020	1,945	27	303	364	13,386	13,274	—	3	10	137	198
Iowa	4	4	15	244	266	1	37	53	1,693	1,592	—	0	1	2	1
Kansas	—	2	8	90	198	2	42	57	1,833	1,827	—	0	2	18	22
Minnesota	—	0	16	—	780	—	37	53	1,650	1,921	—	0	5	—	70
Missouri	6	8	23	391	386	—	149	186	6,429	6,288	—	1	5	79	75
Nebraska <sup>§</sup>	1	3	11	164	194	24	25	50	1,152	1,051	—	0	3	26	20
North Dakota	—	0	12	36	28	—	4	8	174	177	—	0	6	11	10
South Dakota	—	1	8	95	93	—	9	20	455	418	—	0	1	1	—
<b>S. Atlantic</b>	44	50	98	2,413	3,585	1,503	1,483	1,862	67,251	67,964	4	15	31	638	670
Delaware	—	0	3	30	31	25	16	31	719	877	—	0	2	4	5
District of Columbia	—	0	3	29	52	25	38	68	1,758	1,880	—	0	1	—	5
Florida	33	23	50	1,101	1,911	277	377	465	17,503	18,144	3	5	12	203	163
Georgia	—	12	51	631	738	256	312	874	13,800	13,612	—	3	7	115	150
Maryland <sup>§</sup>	10	5	13	264	240	—	120	246	5,028	6,370	—	2	5	82	60
North Carolina	N	0	0	N	N	410	321	548	14,938	12,707	1	1	7	70	115
South Carolina <sup>§</sup>	1	2	8	104	131	148	146	257	7,236	7,112	—	1	5	63	73
Virginia <sup>§</sup>	—	5	32	232	440	355	111	236	5,556	6,762	—	2	8	84	74
West Virginia	—	0	8	22	42	7	16	29	713	500	—	0	9	17	25
<b>E.S. Central</b>	2	3	9	153	202	127	515	1,007	23,303	22,087	—	3	11	165	155
Alabama <sup>§</sup>	2	3	9	153	202	—	162	409	7,825	6,941	—	1	4	47	24
Kentucky	N	0	0	N	N	60	76	712	3,968	3,379	—	0	4	22	33
Mississippi	N	0	0	N	N	3	117	197	4,903	5,371	—	0	3	16	11
Tennessee <sup>§</sup>	N	0	0	N	N	64	147	223	6,607	6,396	—	2	5	80	87
<b>W.S. Central</b>	—	5	15	233	369	143	921	1,319	40,672	43,751	10	2	26	125	120
Arkansas <sup>§</sup>	—	2	9	113	122	75	89	138	4,190	4,202	1	0	3	30	17
Louisiana	—	2	10	120	185	68	125	372	5,630	7,478	—	0	4	40	27
Oklahoma	—	0	0	—	62	—	98	384	4,727	3,836	9	1	19	54	68
Texas <sup>§</sup>	N	0	0	N	N	—	594	821	26,125	28,235	—	0	4	1	8
<b>Mountain</b>	13	25	47	1,184	1,625	87	205	273	9,510	8,447	3	5	12	227	270
Arizona	—	3	6	115	149	—	77	131	3,812	2,839	—	1	6	78	99
Colorado	8	11	25	569	650	75	41	89	1,992	2,478	2	1	5	56	74
Idaho <sup>§</sup>	5	3	9	136	196	—	2	15	120	106	1	0	2	19	17
Montana <sup>§</sup>	—	2	5	72	99	—	1	4	70	95	—	0	1	3	2
Nevada <sup>§</sup>	—	1	7	68	97	—	38	103	1,722	1,566	—	0	2	16	8
New Mexico <sup>§</sup>	—	1	6	81	97	11	32	98	1,538	1,041	—	1	4	37	37
Utah	—	3	9	122	286	—	4	10	217	289	—	0	3	17	27
Wyoming <sup>§</sup>	—	0	5	21	51	1	1	3	39	33	—	0	1	1	6
<b>Pacific</b>	17	48	128	2,218	2,550	127	624	791	27,630	28,739	—	3	8	149	130
Alaska	—	2	7	93	91	—	20	34	883	1,171	—	0	3	23	22
California	9	32	67	1,471	1,546	127	504	695	22,713	23,405	—	0	4	35	24
Hawaii	—	0	4	30	54	—	13	24	553	672	—	0	3	24	19
Oregon	—	7	20	296	443	—	27	52	1,177	933	—	1	6	64	58
Washington	8	7	57	328	416	—	50	79	2,304	2,558	—	0	2	3	7
<b>Territories</b>															
American Samoa	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	3	—	0	8	6	91	—	0	0	—	—
Puerto Rico	—	1	4	38	87	12	6	14	291	289	—	0	0	—	1
U.S. Virgin Islands	—	0	0	—	—	—	2	10	113	124	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

† Data for H. influenzae (age &lt;5 yrs for serotype b, nonserotype b, and unknown serotype) are available in Table I.

§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Morbidity and Mortality Weekly Report

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Hepatitis (viral, acute), by type														
	A					B					C				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
	Med	Max				Med	Max				Med	Max			
<b>United States</b>	8	22	74	1,009	1,469	29	47	167	2,156	2,909	6	18	39	874	743
<b>New England</b>	1	1	5	61	91	—	1	8	66	52	—	1	5	45	51
Connecticut	—	0	3	17	27	—	0	4	10	20	—	0	3	25	34
Maine†	—	0	2	6	7	—	0	2	8	13	—	0	2	4	2
Massachusetts	—	0	3	27	47	—	1	6	46	12	—	0	2	11	13
New Hampshire	—	0	1	—	1	—	0	1	2	5	N	0	0	N	N
Rhode Island†	1	0	1	5	9	U	0	0	U	U	U	0	0	U	U
Vermont†	—	0	2	6	—	—	0	0	—	2	—	0	1	5	2
<b>Mid. Atlantic</b>	1	4	8	185	253	1	5	12	243	254	2	1	6	81	99
New Jersey	—	1	3	29	70	—	1	4	56	71	—	0	2	4	27
New York (Upstate)	1	1	4	44	52	—	1	9	46	44	2	1	4	46	44
New York City	—	1	5	61	80	—	1	5	68	74	—	0	2	2	3
Pennsylvania	—	1	3	51	51	1	2	4	73	65	—	0	4	29	25
<b>E.N. Central</b>	—	3	8	163	190	2	6	37	295	436	—	3	12	166	84
Illinois	—	1	4	50	45	—	1	6	58	117	—	0	2	6	1
Indiana	—	0	3	12	11	—	1	3	49	68	—	1	5	54	26
Michigan	—	1	6	60	70	—	1	6	72	112	—	2	7	98	40
Ohio	—	1	3	35	44	2	1	30	89	89	—	0	1	6	8
Wisconsin	—	0	1	6	20	—	0	3	27	50	—	0	1	2	9
<b>W.N. Central</b>	—	1	25	37	71	1	2	16	116	106	—	0	6	8	20
Iowa	—	0	1	7	11	—	0	1	10	13	—	0	0	—	—
Kansas	—	0	2	3	11	—	0	2	11	10	—	0	1	3	2
Minnesota	—	0	22	9	15	—	0	15	9	8	—	0	6	2	10
Missouri	—	0	1	11	19	1	1	5	73	61	—	0	0	—	6
Nebraska†	—	0	1	5	14	—	0	3	12	12	—	0	1	3	2
North Dakota	—	0	3	—	—	—	0	0	—	—	—	0	0	—	—
South Dakota	—	0	2	2	1	—	0	1	1	2	—	0	0	—	—
<b>S. Atlantic</b>	3	5	12	208	310	10	12	56	599	798	2	4	11	206	169
Delaware	—	0	1	2	7	—	0	2	11	24	U	0	0	U	U
District of Columbia	—	0	0	—	1	—	0	0	—	3	—	0	0	—	2
Florida	1	1	7	71	127	1	4	7	179	269	2	1	3	52	52
Georgia	2	1	5	43	35	1	2	8	102	146	—	1	3	32	29
Maryland†	—	0	4	24	20	2	1	4	49	63	—	0	3	30	21
North Carolina	—	0	3	25	43	—	2	12	99	91	—	1	7	50	36
South Carolina†	—	0	2	9	25	—	1	3	28	54	—	0	1	1	1
Virginia†	—	1	3	26	45	—	1	6	56	86	—	0	3	16	11
West Virginia	—	0	5	8	7	6	0	43	75	62	—	0	6	25	17
<b>E.S. Central</b>	—	1	6	43	42	3	9	14	387	332	—	4	8	162	146
Alabama†	—	0	2	7	6	1	2	6	102	61	—	0	3	16	6
Kentucky	—	0	6	9	22	2	2	6	93	120	—	2	7	74	99
Mississippi	—	0	1	7	2	—	1	3	42	30	U	0	0	U	U
Tennessee†	—	0	5	20	12	—	4	8	150	121	—	1	5	72	41
<b>W.S. Central</b>	2	2	15	117	130	10	6	67	272	513	—	2	11	79	61
Arkansas†	—	0	0	—	2	—	1	4	43	56	—	0	0	—	1
Louisiana	1	0	1	3	11	—	1	4	28	46	—	0	2	5	3
Oklahoma	—	0	4	3	2	9	1	16	80	88	—	1	10	44	26
Texas†	1	2	11	111	115	1	3	45	121	323	—	0	3	30	31
<b>Mountain</b>	1	1	5	55	133	—	1	4	64	125	1	1	4	54	56
Arizona	1	0	2	16	57	—	0	3	14	23	U	0	0	U	U
Colorado	—	0	2	18	34	—	0	2	15	42	1	0	3	17	15
Idaho†	—	0	1	6	6	—	0	1	2	6	—	0	2	9	9
Montana†	—	0	1	2	4	—	0	0	—	—	—	0	1	3	2
Nevada†	—	0	3	5	14	—	0	3	22	38	—	0	2	10	7
New Mexico†	—	0	1	5	5	—	0	2	6	5	—	0	2	12	13
Utah	—	0	2	1	9	—	0	1	5	8	—	0	1	1	10
Wyoming†	—	0	1	2	4	—	0	1	—	3	—	0	1	2	—
<b>Pacific</b>	—	3	13	140	249	2	3	25	114	293	1	1	12	73	57
Alaska	—	0	1	2	3	—	0	1	4	4	U	0	0	U	U
California	—	2	12	98	206	—	1	22	51	205	—	1	4	31	24
Hawaii	—	0	2	8	7	—	0	1	6	6	U	0	0	U	U
Oregon	—	0	2	8	16	—	0	4	29	36	—	0	3	12	14
Washington	—	0	4	24	17	2	0	4	24	42	1	0	5	30	19
<b>Territories</b>															
American Samoa	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	5	8	7	—	2	8	28	71	—	0	4	10	57
Puerto Rico	—	0	2	7	16	—	0	2	8	25	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/pdfs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/pdfs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

† Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Morbidity and Mortality Weekly Report

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Legionellosis					Lyme disease					Malaria				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
		Med	Max				Med	Max				Med	Max		
<b>United States</b>	37	60	167	3,398	3,018	259	380	1,941	28,832	28,524	6	26	114	1,207	1,533
<b>New England</b>	—	5	41	354	247	—	73	473	6,027	8,525	—	2	20	79	97
Connecticut	—	1	10	72	47	—	30	226	2,436	2,931	—	0	20	10	2
Maine†	—	0	2	17	11	—	14	66	846	645	—	0	2	6	5
Massachusetts	—	3	26	211	118	—	21	94	1,222	3,189	—	1	5	52	68
New Hampshire	—	0	3	20	22	—	9	77	846	1,253	—	0	1	2	4
Rhode Island†	—	0	6	23	40	—	1	31	123	177	—	0	1	3	15
Vermont†	—	0	2	11	9	—	6	67	554	330	—	0	1	6	3
<b>Mid. Atlantic</b>	10	15	82	1,141	850	247	184	1,204	18,014	10,247	1	8	12	291	473
New Jersey	—	2	16	165	142	55	75	592	7,782	3,516	—	0	6	8	93
New York (Upstate)	7	5	27	341	258	92	36	214	3,404	2,411	1	1	4	48	70
New York City	—	3	14	185	151	—	1	16	106	683	—	4	10	182	254
Pennsylvania	3	5	37	450	299	100	69	506	6,722	3,637	—	1	5	53	56
<b>E.N. Central</b>	10	11	51	742	634	2	16	131	1,364	3,743	1	3	10	142	151
Illinois	—	2	11	115	142	—	1	18	157	134	—	1	5	53	55
Indiana	2	1	6	96	55	—	0	15	92	78	—	0	2	9	15
Michigan	—	3	15	180	166	—	1	13	103	92	—	0	4	29	29
Ohio	8	5	34	350	213	1	1	9	44	29	1	1	4	39	38
Wisconsin	—	0	2	1	58	1	13	91	968	3,410	—	0	2	12	14
<b>W.N. Central</b>	—	1	9	76	116	—	1	13	123	2,062	—	1	45	33	65
Iowa	—	0	2	10	15	—	0	11	79	85	—	0	3	20	13
Kansas	—	0	2	10	11	—	0	2	12	10	—	0	2	8	11
Minnesota	—	0	8	—	35	—	0	10	—	1,936	—	0	45	—	3
Missouri	—	1	5	46	33	—	0	0	—	4	—	0	1	—	20
Nebraska†	—	0	1	6	9	—	0	2	8	8	—	0	1	4	15
North Dakota	—	0	1	2	4	—	0	10	21	18	—	0	1	—	—
South Dakota	—	0	1	2	9	—	0	1	3	1	—	0	1	1	3
<b>S. Atlantic</b>	9	10	29	500	496	9	51	171	3,076	3,600	4	8	24	397	409
Delaware	—	0	4	21	15	—	12	48	760	615	—	0	3	7	2
District of Columbia	—	0	3	9	16	—	0	3	29	39	—	0	1	5	11
Florida	6	4	13	167	149	2	2	7	106	76	2	2	7	93	117
Georgia	—	1	3	33	58	—	0	5	24	10	—	1	5	68	67
Maryland†	1	2	14	116	105	6	18	113	1,127	1,551	1	2	14	117	92
North Carolina	1	1	7	59	56	—	0	12	66	73	1	0	6	35	49
South Carolina†	1	0	5	19	13	—	0	6	32	29	—	0	1	5	5
Virginia†	—	1	9	70	71	1	15	76	855	1,090	—	1	8	67	63
West Virginia	—	0	2	6	13	—	0	14	77	117	—	0	0	—	3
<b>E.S. Central</b>	—	2	10	137	126	1	1	5	53	42	—	0	4	31	30
Alabama†	—	0	2	23	18	—	0	2	17	2	—	0	3	6	9
Kentucky	—	0	3	31	27	—	0	1	2	5	—	0	1	7	7
Mississippi	—	0	3	13	12	—	0	1	3	—	—	0	1	1	2
Tennessee†	—	1	8	70	69	1	0	3	31	35	—	0	3	17	12
<b>W.S. Central</b>	2	2	13	119	159	—	1	29	44	104	—	0	18	28	90
Arkansas†	—	0	2	13	18	—	0	0	—	—	—	0	1	5	4
Louisiana	—	0	3	14	10	—	0	1	1	3	—	0	1	1	5
Oklahoma	—	0	3	9	13	—	0	0	—	—	—	0	1	5	5
Texas†	2	2	11	83	118	—	1	29	43	101	—	0	17	17	76
<b>Mountain</b>	2	2	8	90	159	—	0	4	35	27	—	1	4	58	58
Arizona	—	1	4	33	61	—	0	2	10	2	—	0	4	22	23
Colorado	1	0	1	6	29	—	0	1	1	3	—	0	3	20	20
Idaho†	1	0	1	7	6	—	0	2	4	9	—	0	1	2	3
Montana†	—	0	1	1	4	—	0	3	9	4	—	0	1	2	2
Nevada†	—	0	2	14	19	—	0	1	4	1	—	0	2	8	6
New Mexico†	—	0	2	10	9	—	0	2	5	5	—	0	1	3	1
Utah	—	0	2	15	23	—	0	1	1	3	—	0	1	1	3
Wyoming†	—	0	2	4	8	—	0	1	1	—	—	0	0	—	—
<b>Pacific</b>	4	5	21	239	231	—	2	11	96	174	—	4	11	148	160
Alaska	—	0	0	—	2	—	0	2	11	7	—	0	2	5	4
California	4	4	15	200	190	—	1	9	61	115	—	2	8	101	106
Hawaii	—	0	1	2	1	N	0	0	N	N	—	0	1	7	3
Oregon	—	0	3	17	14	—	0	2	11	39	—	0	4	14	14
Washington	—	0	6	20	24	—	0	6	13	13	—	0	3	21	33
<b>Territories</b>															
American Samoa	N	0	0	N	N	N	0	0	N	N	—	0	1	1	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	1	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	1	—	1	N	0	0	N	N	—	0	0	—	5
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

† Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Morbidity and Mortality Weekly Report

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Meningococcal disease, invasive† All serogroups					Mumps					Pertussis				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
		Med	Max				Med	Max				Med	Max		
<b>United States</b>	4	13	53	592	697	3	7	47	293	2,502	163	276	2,925	12,503	21,234
<b>New England</b>	—	0	3	27	18	—	0	2	11	25	4	12	30	582	478
Connecticut	—	0	1	3	2	—	0	0	—	11	—	1	5	54	103
Maine <sup>§</sup>	—	0	1	5	4	—	0	2	2	2	—	2	19	181	43
Massachusetts	—	0	2	13	6	—	0	1	4	9	—	4	10	192	258
New Hampshire	—	0	1	1	—	—	0	0	—	3	—	2	9	107	19
Rhode Island <sup>§</sup>	—	0	1	—	1	—	0	2	4	—	—	0	4	24	38
Vermont <sup>§</sup>	—	0	3	5	5	—	0	1	1	—	—	0	4	24	17
<b>Mid. Atlantic</b>	1	1	6	68	70	—	1	23	34	2,100	56	30	125	1,453	1,472
New Jersey	—	0	1	5	19	—	0	2	10	347	—	3	10	154	150
New York (Upstate)	—	0	4	21	11	—	0	3	11	663	36	13	81	636	471
New York City	—	0	3	25	18	—	0	22	10	1,039	—	0	36	74	78
Pennsylvania	1	0	2	17	22	—	0	8	3	51	20	12	70	589	773
<b>E.N. Central</b>	—	2	6	84	120	1	2	7	81	67	10	61	198	2,642	4,908
Illinois	—	0	3	24	21	—	1	5	54	25	—	17	46	743	887
Indiana	—	0	2	17	26	—	0	0	—	4	—	4	23	195	662
Michigan	—	0	2	11	22	—	0	2	10	18	1	12	48	584	1,358
Ohio	—	0	2	22	31	1	0	5	14	17	9	13	80	656	1,527
Wisconsin	—	0	2	10	20	—	0	1	3	3	—	11	24	464	474
<b>W.N. Central</b>	1	1	4	44	47	1	0	4	32	81	15	20	501	1,041	2,181
Iowa	—	0	1	11	9	—	0	1	5	38	—	4	25	166	620
Kansas	—	0	1	2	6	—	0	1	4	4	—	2	10	102	160
Minnesota	—	0	2	—	5	—	0	4	1	4	—	0	469	326	648
Missouri	1	0	3	18	20	—	0	3	12	10	15	7	37	328	475
Nebraska <sup>§</sup>	—	0	2	10	5	1	0	1	6	23	—	1	7	50	199
North Dakota	—	0	1	1	2	—	0	3	4	—	—	0	10	41	50
South Dakota	—	0	1	2	—	—	0	0	—	2	—	0	7	28	29
<b>S. Atlantic</b>	1	2	8	118	122	1	0	4	32	53	12	27	106	1,222	1,614
Delaware	—	0	1	1	1	—	0	0	—	—	—	0	5	22	12
District of Columbia	—	0	1	1	1	—	0	0	—	3	—	0	2	3	11
Florida	1	1	5	46	55	1	0	2	8	8	5	6	17	289	284
Georgia	—	0	1	14	11	—	0	2	5	4	3	3	8	155	226
Maryland <sup>§</sup>	—	0	1	11	9	—	0	1	1	11	3	1	7	88	126
North Carolina	—	0	3	13	13	—	0	2	9	9	1	2	35	158	308
South Carolina <sup>§</sup>	—	0	1	9	11	—	0	0	—	4	—	3	25	133	321
Virginia <sup>§</sup>	—	0	2	16	19	—	0	4	9	12	—	7	41	314	233
West Virginia	—	0	3	7	2	—	0	0	—	2	—	0	41	60	93
<b>E.S. Central</b>	—	0	2	21	39	—	0	1	4	10	—	7	28	319	727
Alabama <sup>§</sup>	—	0	2	9	6	—	0	1	1	6	—	2	11	123	186
Kentucky	—	0	2	2	17	—	0	0	—	1	—	1	16	66	243
Mississippi	—	0	1	3	5	—	0	1	3	—	—	1	5	37	93
Tennessee <sup>§</sup>	—	0	2	7	11	—	0	0	—	3	—	2	10	93	205
<b>W.S. Central</b>	—	1	12	52	81	—	1	15	61	109	7	21	297	825	2,670
Arkansas <sup>§</sup>	—	0	2	11	6	—	0	2	3	5	—	1	16	53	190
Louisiana	—	0	2	10	13	—	0	0	—	8	—	0	3	17	41
Oklahoma	—	0	2	10	15	—	0	2	4	—	—	0	92	52	65
Texas <sup>§</sup>	—	0	10	21	47	—	1	14	54	96	7	18	187	703	2,374
<b>Mountain</b>	—	1	4	43	50	—	0	2	7	18	24	38	100	1,713	1,483
Arizona	—	0	1	11	13	—	0	0	—	5	—	14	29	615	436
Colorado	—	0	1	9	19	—	0	1	3	7	15	9	63	377	310
Idaho <sup>§</sup>	—	0	1	5	5	—	0	1	1	1	5	2	11	140	181
Montana <sup>§</sup>	—	0	2	4	1	—	0	0	—	—	2	2	32	130	81
Nevada <sup>§</sup>	—	0	1	4	8	—	0	0	—	1	—	0	5	30	32
New Mexico <sup>§</sup>	—	0	1	2	3	—	0	2	2	—	2	3	17	201	130
Utah	—	0	2	8	1	—	0	0	—	3	—	5	16	211	301
Wyoming <sup>§</sup>	—	0	1	—	—	—	0	1	1	1	—	0	1	9	12
<b>Pacific</b>	1	3	26	135	150	—	0	9	31	39	35	60	1,710	2,706	5,701
Alaska	—	0	1	2	1	—	0	1	1	1	—	0	4	25	37
California	—	2	17	94	97	—	0	9	23	25	—	43	1,569	1,782	4,953
Hawaii	—	0	1	4	1	—	0	1	2	4	—	1	9	76	62
Oregon	—	0	3	21	30	—	0	1	4	3	—	5	23	266	255
Washington	1	0	8	14	21	—	0	1	1	6	35	9	131	557	394
<b>Territories</b>															
American Samoa	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	1	4	12	481	—	1	14	31	3
Puerto Rico	—	0	0	—	2	—	0	1	1	1	—	0	1	2	3
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/pdfs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/pdfs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

† Data for meningococcal disease, invasive caused by serogroups A, C, Y, and W-135; serogroup B; other serogroup; and unknown serogroup are available in Table I.

§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Morbidity and Mortality Weekly Report

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Rabies, animal					Salmonellosis					Shiga toxin-producing <i>E. coli</i> (STEC) <sup>†</sup>				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
		Med	Max				Med	Max				Med	Max		
<b>United States</b>	48	60	119	2,739	3,975	513	860	1,843	41,876	48,881	41	89	264	4,489	4,791
<b>New England</b>	1	4	16	230	283	1	34	107	1,825	2,187	—	3	12	187	202
Connecticut	—	2	10	110	132	—	8	30	420	491	—	1	4	48	60
Maine <sup>§</sup>	—	1	6	59	58	—	2	8	115	118	—	0	3	28	19
Massachusetts	—	0	0	—	—	—	19	45	937	1,191	—	1	9	69	79
New Hampshire	—	0	3	17	16	—	3	8	148	162	—	0	3	23	21
Rhode Island <sup>§</sup>	—	0	6	21	28	—	0	62	135	151	—	0	2	4	3
Vermont <sup>§</sup>	1	0	2	23	49	1	1	8	70	74	—	0	3	15	20
<b>Mid. Atlantic</b>	9	16	35	791	977	42	86	205	4,819	5,387	3	11	36	552	515
New Jersey	—	0	0	—	—	—	15	48	825	1,110	—	2	7	109	113
New York (Upstate)	9	7	20	342	463	34	25	67	1,282	1,309	2	3	12	189	179
New York City	—	0	3	9	144	1	19	42	1,031	1,227	—	1	6	83	68
Pennsylvania	—	8	21	440	370	7	30	111	1,681	1,741	1	3	18	171	155
<b>E.N. Central</b>	—	2	17	173	225	24	86	152	3,981	5,358	3	12	48	768	754
Illinois	—	0	6	49	114	—	30	75	1,410	1,793	—	3	13	169	144
Indiana	—	0	7	26	—	—	8	19	350	703	—	2	8	86	130
Michigan	—	1	6	54	66	6	14	42	754	872	—	3	19	161	140
Ohio	—	1	5	44	45	18	22	46	1,113	1,199	3	3	10	169	129
Wisconsin	N	0	0	N	N	—	7	45	354	791	—	2	20	183	211
<b>W.N. Central</b>	1	1	40	75	237	19	41	103	2,132	2,755	8	12	39	703	838
Iowa	—	0	1	—	26	1	9	19	412	491	—	2	15	174	167
Kansas	1	0	4	30	59	5	7	27	422	407	—	2	8	98	69
Minnesota	—	0	34	—	25	—	0	16	—	667	—	0	7	—	270
Missouri	—	0	1	—	62	13	17	46	891	741	8	5	32	278	213
Nebraska <sup>§</sup>	—	0	3	32	49	—	4	13	227	234	—	2	7	94	70
North Dakota	—	0	6	13	16	—	0	15	37	47	—	0	4	12	17
South Dakota	—	0	0	—	—	—	3	16	143	168	—	1	4	47	32
<b>S. Atlantic</b>	13	18	93	984	1,047	307	278	720	13,058	14,302	6	13	27	578	651
Delaware	—	0	0	—	—	1	3	11	161	163	—	0	2	15	6
District of Columbia	—	0	0	—	—	—	1	5	47	84	—	0	1	3	9
Florida	—	0	84	105	121	170	107	203	5,233	5,670	1	3	15	131	199
Georgia	—	0	0	—	—	35	41	126	2,240	2,630	—	2	8	108	96
Maryland <sup>§</sup>	—	5	13	247	347	17	19	42	870	975	2	1	6	53	92
North Carolina	—	0	0	—	—	56	30	251	2,018	2,058	2	2	11	103	82
South Carolina <sup>§</sup>	N	0	0	N	N	10	30	70	1,397	1,525	—	0	4	14	21
Virginia <sup>§</sup>	12	12	27	554	506	18	21	68	1,047	1,039	1	3	9	148	127
West Virginia	1	0	30	78	73	—	0	14	45	158	—	0	4	3	19
<b>E.S. Central</b>	2	3	11	164	163	15	57	187	3,638	3,666	1	4	17	232	257
Alabama <sup>§</sup>	—	1	7	75	69	8	19	70	1,109	975	—	1	15	72	50
Kentucky	—	0	2	16	20	1	9	20	415	537	—	1	5	42	67
Mississippi	—	0	1	1	—	—	17	66	1,197	1,148	—	0	4	20	30
Tennessee <sup>§</sup>	2	1	6	72	74	6	16	51	917	1,006	1	1	11	98	110
<b>W.S. Central</b>	21	1	31	104	782	61	126	515	5,695	6,622	4	7	151	351	330
Arkansas <sup>§</sup>	—	0	10	49	33	6	13	53	784	731	3	1	6	55	46
Louisiana	—	0	0	—	—	5	14	44	869	1,259	—	0	1	10	20
Oklahoma	21	0	20	55	41	30	11	95	662	615	1	1	55	63	41
Texas <sup>§</sup>	—	0	15	—	708	20	85	381	3,380	4,017	—	5	95	223	223
<b>Mountain</b>	—	0	4	39	66	14	45	91	2,184	2,672	1	10	26	510	632
Arizona	N	0	0	N	N	1	14	33	682	922	—	2	7	79	93
Colorado	—	0	0	—	—	11	10	24	497	526	1	2	7	100	211
Idaho <sup>§</sup>	—	0	1	6	11	1	3	8	135	149	—	2	8	112	95
Montana <sup>§</sup>	N	0	0	N	N	1	2	10	120	88	—	0	5	37	39
Nevada <sup>§</sup>	—	0	2	16	8	—	3	8	146	282	—	1	7	38	38
New Mexico <sup>§</sup>	—	0	2	10	13	—	5	22	283	318	—	1	3	39	47
Utah	—	0	2	7	10	—	5	15	268	329	—	1	7	80	90
Wyoming <sup>§</sup>	—	0	0	—	24	—	1	9	53	58	—	0	7	25	19
<b>Pacific</b>	1	3	15	179	195	30	95	288	4,544	5,932	15	13	46	608	612
Alaska	—	0	2	12	12	—	1	6	48	78	—	0	1	3	2
California	1	3	11	153	166	16	72	232	3,469	4,401	7	7	36	370	279
Hawaii	—	0	0	—	—	1	7	14	307	302	—	0	1	6	28
Oregon	—	0	2	14	17	—	5	12	226	480	—	1	11	88	108
Washington	—	0	14	—	—	13	11	42	494	671	8	2	13	141	195
<b>Territories</b>															
American Samoa	N	0	0	N	N	—	0	0	—	2	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	3	6	11	—	0	0	—	—
Puerto Rico	—	0	6	34	40	—	4	16	188	556	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

<sup>†</sup> Includes *E. coli* O157:H7; Shiga toxin-positive, serogroup non-O157; and Shiga toxin-positive, not serogrouped.

<sup>§</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Spotted Fever Rickettsiosis (including RMSF) <sup>†</sup>														
	Shigellosis					Confirmed					Probable				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
	Med	Max				Med	Max				Med	Max			
<b>United States</b>	146	245	742	10,136	12,645	1	3	15	185	133	7	27	245	1,822	1,489
<b>New England</b>	—	4	19	228	306	—	0	1	1	—	—	0	1	6	5
Connecticut	—	0	4	36	69	—	0	0	—	—	—	0	0	—	—
Maine <sup>§</sup>	—	0	8	29	7	—	0	0	—	—	—	0	0	—	2
Massachusetts	—	3	18	150	203	—	0	0	—	—	—	0	1	4	—
New Hampshire	—	0	1	3	14	—	0	1	1	—	—	0	1	1	1
Rhode Island <sup>§</sup>	—	0	4	6	12	—	0	0	—	—	—	0	1	1	2
Vermont <sup>§</sup>	—	0	1	4	1	—	0	0	—	—	—	0	0	—	—
<b>Mid. Atlantic</b>	12	15	74	864	1,502	1	0	2	16	2	—	1	4	53	98
New Jersey	—	3	16	172	351	—	0	0	—	1	—	0	1	—	58
New York (Upstate)	9	4	20	265	209	—	0	1	3	1	—	0	1	7	15
New York City	3	5	22	317	283	—	0	0	—	—	—	0	3	29	11
Pennsylvania	—	3	56	110	659	1	0	2	13	—	—	0	3	17	14
<b>E.N. Central</b>	6	15	40	684	1,439	—	0	2	9	3	—	1	8	105	75
Illinois	—	5	16	200	795	—	0	1	2	2	—	0	4	43	34
Indiana <sup>§</sup>	—	1	4	43	59	—	0	1	2	1	—	0	4	44	20
Michigan	2	3	10	158	233	—	0	1	2	—	—	0	1	1	1
Ohio	4	5	27	283	284	—	0	2	3	—	—	0	2	17	14
Wisconsin	—	0	4	—	68	—	0	0	—	—	—	0	1	—	6
<b>W.N. Central</b>	4	6	22	272	1,972	—	0	4	25	13	1	4	29	339	271
Iowa	—	0	4	19	47	—	0	0	—	—	—	0	2	5	5
Kansas <sup>§</sup>	1	1	8	57	273	—	0	0	—	—	—	0	0	—	—
Minnesota	—	0	2	—	60	—	0	0	—	—	—	0	2	—	—
Missouri	3	4	17	178	1,530	—	0	3	18	10	1	4	29	328	263
Nebraska <sup>§</sup>	—	0	2	14	55	—	0	3	5	3	—	0	1	5	2
North Dakota	—	0	0	—	—	—	0	1	2	—	—	0	0	—	1
South Dakota	—	0	2	4	7	—	0	0	—	—	—	0	1	1	—
<b>S. Atlantic</b>	75	70	134	3,363	2,351	—	1	8	99	80	2	6	55	513	467
Delaware <sup>§</sup>	—	0	2	6	38	—	0	1	1	1	—	0	4	18	19
District of Columbia	—	0	2	12	30	—	0	1	1	1	—	0	1	2	—
Florida <sup>§</sup>	62	47	98	2,355	1,005	—	0	1	3	3	—	0	2	12	10
Georgia	10	11	24	519	724	—	0	6	63	57	—	0	0	—	—
Maryland <sup>§</sup>	—	2	7	92	120	—	0	1	3	—	—	0	2	29	49
North Carolina	1	3	36	183	205	—	0	4	14	13	—	0	49	249	240
South Carolina <sup>§</sup>	—	1	49	99	66	—	0	2	11	1	—	0	2	20	18
Virginia <sup>§</sup>	2	2	8	93	127	—	0	1	3	4	2	3	14	179	131
West Virginia	—	0	66	4	36	—	0	0	—	—	—	0	1	4	—
<b>E.S. Central</b>	6	15	41	640	704	—	0	2	10	20	1	4	24	318	397
Alabama <sup>§</sup>	6	5	21	244	195	—	0	1	4	5	1	1	8	69	77
Kentucky	—	1	6	38	213	—	0	1	1	6	—	0	0	—	—
Mississippi	—	3	23	196	51	—	0	0	—	1	—	0	2	12	23
Tennessee <sup>§</sup>	—	4	11	162	245	—	0	2	5	8	—	3	18	237	297
<b>W.S. Central</b>	29	57	503	2,403	2,518	—	0	8	11	6	3	1	235	441	162
Arkansas <sup>§</sup>	1	2	7	73	68	—	0	3	6	2	—	0	50	375	110
Louisiana	1	4	21	241	262	—	0	0	—	—	—	0	2	7	2
Oklahoma	6	2	161	173	248	—	0	5	3	3	—	0	202	42	25
Texas <sup>§</sup>	21	40	338	1,916	1,940	—	0	1	2	1	3	0	5	17	25
<b>Mountain</b>	7	15	42	739	775	—	0	5	13	3	—	0	6	47	13
Arizona	3	5	27	340	427	—	0	4	12	1	—	0	6	31	1
Colorado <sup>§</sup>	4	1	8	90	89	—	0	1	—	—	—	0	1	2	1
Idaho <sup>§</sup>	—	0	3	16	23	—	0	1	1	—	—	0	1	1	5
Montana <sup>§</sup>	—	1	15	121	7	—	0	0	—	2	—	0	1	1	1
Nevada <sup>§</sup>	—	0	4	31	47	—	0	0	—	—	—	0	1	2	—
New Mexico <sup>§</sup>	—	2	9	95	138	—	0	0	—	—	—	0	1	1	1
Utah	—	1	4	44	44	—	0	0	—	—	—	0	1	1	3
Wyoming <sup>§</sup>	—	0	1	2	—	—	0	0	—	—	—	0	2	8	1
<b>Pacific</b>	7	21	63	943	1,078	—	0	2	1	6	—	0	0	—	1
Alaska	—	0	2	5	2	N	0	0	N	N	N	0	0	N	N
California	4	17	59	778	873	—	0	1	1	6	—	0	0	—	—
Hawaii	—	1	3	42	43	N	0	0	N	N	N	0	0	N	N
Oregon	—	1	4	39	57	—	0	0	—	—	—	0	0	—	1
Washington	3	1	6	79	103	—	0	1	—	—	—	0	0	—	—
<b>Territories</b>															
American Samoa	—	0	1	1	4	N	0	0	N	N	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	1	1	5	N	0	0	N	N	N	0	0	N	N
Puerto Rico	—	0	1	—	5	N	0	0	N	N	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.<sup>†</sup> Illnesses with similar clinical presentation that result from Spotted fever group rickettsia infections are reported as Spotted fever rickettsioses. Rocky Mountain spotted fever (RMSF) caused by *Rickettsia rickettsii*, is the most common and well-known spotted fever.<sup>§</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS).



Morbidity and Mortality Weekly Report

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	<i>Streptococcus pneumoniae</i> , <sup>†</sup> invasive disease														
	All ages					Age <5					Syphilis, primary and secondary				
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Current week	Previous 52 weeks		Cum 2011	Cum 2010
		Med	Max				Med	Max				Med	Max		
<b>United States</b>	121	292	937	11,636	13,423	25	26	118	1,066	1,864	68	261	363	11,238	12,234
<b>New England</b>	1	15	79	645	764	—	1	5	42	94	2	7	16	318	432
Connecticut	—	6	49	282	312	—	0	3	10	26	2	1	5	41	85
Maine <sup>§</sup>	—	2	13	110	104	—	0	1	4	9	—	0	2	12	27
Massachusetts	—	0	4	31	62	—	0	2	15	42	—	4	9	202	264
New Hampshire	1	2	8	87	112	—	0	1	5	5	—	0	3	17	22
Rhode Island <sup>§</sup>	—	2	8	73	101	—	0	1	2	7	—	0	7	38	32
Vermont <sup>§</sup>	—	1	6	62	73	—	0	2	6	5	—	0	2	8	2
<b>Mid. Atlantic</b>	5	26	81	1,165	1,410	2	2	27	96	207	11	29	53	1,344	1,535
New Jersey	—	13	35	534	627	—	0	4	32	54	—	4	13	194	218
New York (Upstate)	2	1	10	73	130	2	1	9	40	97	7	3	20	161	117
New York City	3	12	42	558	653	—	0	14	24	56	2	14	31	683	872
Pennsylvania	N	0	0	N	N	N	0	0	N	N	2	6	14	306	328
<b>E.N. Central</b>	34	63	114	2,593	2,771	1	5	13	207	332	5	30	48	1,321	1,715
Illinois	N	0	0	N	N	—	1	6	65	86	5	12	24	542	820
Indiana	—	15	33	579	641	—	0	4	28	50	—	3	8	134	160
Michigan	1	14	29	573	634	—	1	3	29	75	—	5	12	230	216
Ohio	28	26	45	1,069	1,047	—	2	7	70	89	—	9	21	366	473
Wisconsin	5	8	24	372	449	1	0	3	15	32	—	1	5	49	46
<b>W.N. Central</b>	5	2	33	149	756	4	1	6	61	146	1	6	13	251	327
Iowa	N	0	0	N	N	N	0	0	N	N	—	0	2	16	18
Kansas	N	0	0	N	N	N	0	0	N	N	—	0	3	21	18
Minnesota	—	0	17	—	574	—	0	3	—	81	—	2	8	102	135
Missouri	N	0	0	N	N	2	0	4	35	38	—	2	6	103	142
Nebraska <sup>§</sup>	5	2	9	105	117	2	0	2	12	15	1	0	2	8	9
North Dakota	—	0	25	44	65	—	0	1	1	2	—	0	1	1	1
South Dakota	N	0	0	N	N	—	0	2	13	10	—	0	0	—	4
<b>S. Atlantic</b>	42	70	170	3,219	3,584	12	6	25	286	500	40	67	178	2,991	2,829
Delaware	—	1	6	40	37	—	0	1	—	—	—	0	4	18	4
District of Columbia	—	1	4	43	67	—	0	1	5	8	4	3	8	139	123
Florida	29	23	68	1,171	1,276	7	2	13	116	172	2	24	36	1,045	1,056
Georgia	7	20	54	864	1,195	3	2	5	68	147	13	14	130	666	608
Maryland <sup>§</sup>	6	10	33	478	470	2	1	4	34	51	—	8	20	385	284
North Carolina	N	0	0	N	N	N	0	0	N	N	15	8	19	341	356
South Carolina <sup>§</sup>	—	7	25	368	431	—	0	3	23	50	5	4	11	202	131
Virginia <sup>§</sup>	N	0	0	N	N	—	0	3	26	51	1	4	12	193	261
West Virginia	—	0	48	255	108	—	0	6	14	21	—	0	1	2	6
<b>E.S. Central</b>	2	18	36	770	914	1	1	4	63	104	—	15	34	664	785
Alabama <sup>§</sup>	N	0	0	N	N	N	0	0	N	N	—	4	11	189	223
Kentucky	N	0	0	N	N	N	0	0	N	N	—	2	16	105	118
Mississippi	N	0	0	N	N	—	0	2	11	16	—	3	14	163	193
Tennessee <sup>§</sup>	2	18	36	770	914	1	1	4	52	88	—	5	11	207	251
<b>W.S. Central</b>	18	30	368	1,550	1,625	3	4	38	180	261	1	36	50	1,555	1,893
Arkansas <sup>§</sup>	1	3	26	189	151	1	0	3	12	17	1	3	10	169	197
Louisiana	—	2	11	134	113	—	0	2	12	24	—	6	25	336	501
Oklahoma	N	0	0	N	N	1	1	8	32	42	—	2	8	86	84
Texas <sup>§</sup>	17	25	333	1,227	1,361	1	2	27	124	178	—	23	31	964	1,111
<b>Mountain</b>	14	30	72	1,408	1,500	2	3	8	117	203	1	12	20	486	549
Arizona	7	12	45	653	686	1	1	5	53	87	—	4	10	197	201
Colorado	6	9	23	455	470	1	0	4	33	60	1	2	6	96	132
Idaho <sup>§</sup>	N	0	0	N	N	—	0	1	4	8	—	0	4	11	2
Montana <sup>§</sup>	N	0	0	N	N	N	0	0	N	N	—	0	1	4	3
Nevada <sup>§</sup>	N	0	0	N	N	N	0	0	N	N	—	2	9	115	105
New Mexico <sup>§</sup>	1	4	13	206	141	—	0	2	15	16	—	1	4	54	47
Utah	—	1	8	74	190	—	0	3	12	29	—	0	2	9	59
Wyoming <sup>§</sup>	—	0	15	20	13	—	0	1	—	3	—	0	0	—	—
<b>Pacific</b>	—	3	11	137	99	—	0	2	14	17	7	55	72	2,308	2,169
Alaska	—	2	11	132	99	—	0	1	11	17	—	0	1	1	3
California	N	0	0	N	N	N	0	0	N	N	7	43	60	1,884	1,837
Hawaii	—	0	3	5	—	—	0	1	3	—	—	0	5	11	35
Oregon	N	0	0	N	N	N	0	0	N	N	—	3	13	157	60
Washington	N	0	0	N	N	N	0	0	N	N	—	5	11	255	234
<b>Territories</b>															
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	0	—	—	—	0	0	—	—	8	4	14	211	203
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/nndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

<sup>†</sup> Includes drug resistant and susceptible cases of invasive *Streptococcus pneumoniae* disease among children <5 years and among all ages. Case definition: Isolation of *S. pneumoniae* from a normally sterile body site (e.g., blood or cerebrospinal fluid).

<sup>§</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Morbidity and Mortality Weekly Report

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 19, 2011, and November 20, 2010 (46th week)\*

Reporting area	Varicella (chickenpox)					West Nile virus disease <sup>†</sup>									
	Current week	Previous 52 weeks		Cum 2011	Cum 2010	Neuroinvasive					Nonneuroinvasive <sup>§</sup>				
		Med	Max			Current week	Previous 52 weeks	Cum 2011	Cum 2010	Current week	Previous 52 weeks	Cum 2011	Cum 2010		
<b>United States</b>	146	267	367	11,363	13,684	—	0	58	443	626	—	0	27	200	392
<b>New England</b>	7	21	50	1,032	1,052	—	0	3	14	14	—	0	1	2	5
Connecticut	5	5	16	246	305	—	0	2	8	7	—	0	1	1	4
Maine <sup>¶</sup>	—	4	10	170	215	—	0	0	—	—	—	0	0	—	—
Massachusetts	—	7	18	389	240	—	0	2	4	6	—	0	1	1	1
New Hampshire	—	2	7	102	146	—	0	0	—	1	—	0	0	—	—
Rhode Island <sup>¶</sup>	—	0	6	33	43	—	0	1	1	—	—	0	0	—	—
Vermont <sup>¶</sup>	2	1	10	92	103	—	0	1	1	—	—	0	0	—	—
<b>Mid. Atlantic</b>	26	42	78	2,172	1,541	—	0	11	34	123	—	0	6	22	63
New Jersey	12	18	68	1,292	530	—	0	1	2	15	—	0	2	5	15
New York (Upstate)	N	0	0	N	N	—	0	5	18	56	—	0	4	14	30
New York City	—	0	0	—	—	—	0	4	9	33	—	0	1	2	9
Pennsylvania	14	19	40	880	1,011	—	0	2	5	19	—	0	1	1	9
<b>E.N. Central</b>	51	64	115	2,618	4,404	—	0	13	71	80	—	0	5	25	30
Illinois	2	15	31	656	1,103	—	0	6	21	45	—	0	4	10	16
Indiana <sup>¶</sup>	—	5	18	218	321	—	0	2	7	6	—	0	1	2	7
Michigan	18	18	39	846	1,303	—	0	7	32	25	—	0	1	1	4
Ohio	31	21	58	896	1,214	—	0	3	10	4	—	0	3	11	1
Wisconsin	—	0	15	2	463	—	0	1	1	—	—	0	1	1	2
<b>W.N. Central</b>	—	7	42	353	867	—	0	8	29	32	—	0	7	28	75
Iowa	N	0	0	N	N	—	0	2	5	5	—	0	2	4	4
Kansas <sup>¶</sup>	—	2	15	97	333	—	0	1	4	4	—	0	0	—	15
Minnesota	—	0	1	1	—	—	0	1	1	4	—	0	1	1	4
Missouri	—	3	24	175	418	—	0	1	4	3	—	0	2	4	—
Nebraska <sup>¶</sup>	—	0	4	7	21	—	0	4	14	10	—	0	3	14	29
North Dakota	—	0	10	36	39	—	0	1	1	2	—	0	1	3	7
South Dakota	—	1	5	37	56	—	0	0	—	4	—	0	1	2	16
<b>S. Atlantic</b>	21	33	64	1,564	1,933	—	0	10	51	38	—	0	4	18	22
Delaware <sup>¶</sup>	—	0	3	6	36	—	0	1	1	—	—	0	0	—	—
District of Columbia	—	0	2	12	19	—	0	1	3	3	—	0	1	1	3
Florida <sup>¶</sup>	15	16	38	776	891	—	0	5	19	9	—	0	2	2	3
Georgia	N	0	0	N	N	—	0	2	7	4	—	0	1	5	9
Maryland <sup>¶</sup>	N	0	0	N	N	—	0	5	10	17	—	0	3	10	6
North Carolina	N	0	0	N	N	—	0	1	2	—	—	0	0	—	—
South Carolina <sup>¶</sup>	—	0	9	12	75	—	0	0	—	1	—	0	0	—	—
Virginia <sup>¶</sup>	6	7	25	390	502	—	0	2	8	4	—	0	0	—	1
West Virginia	—	6	32	368	410	—	0	1	1	—	—	0	0	—	—
<b>E.S. Central</b>	—	5	15	237	274	—	0	10	52	8	—	0	5	25	10
Alabama <sup>¶</sup>	—	5	14	225	266	—	0	1	3	1	—	0	0	—	2
Kentucky	N	0	0	N	N	—	0	2	4	2	—	0	1	1	1
Mississippi	—	0	3	12	8	—	0	5	29	3	—	0	4	22	5
Tennessee <sup>¶</sup>	N	0	0	N	N	—	0	3	16	2	—	0	1	2	2
<b>W.S. Central</b>	28	45	258	2,286	2,542	—	0	4	25	102	—	0	3	11	20
Arkansas <sup>¶</sup>	1	4	20	261	178	—	0	1	1	6	—	0	0	—	1
Louisiana	—	1	6	71	80	—	0	2	6	18	—	0	2	4	7
Oklahoma	N	0	0	N	N	—	0	1	—	1	—	0	0	—	—
Texas <sup>¶</sup>	27	41	247	1,954	2,284	—	0	3	18	77	—	0	3	7	12
<b>Mountain</b>	13	17	65	994	965	—	0	10	60	156	—	0	4	26	127
Arizona	—	4	50	409	—	—	0	6	38	106	—	0	2	12	60
Colorado <sup>¶</sup>	11	4	31	244	368	—	0	2	2	26	—	0	2	5	55
Idaho <sup>¶</sup>	N	0	0	N	N	—	0	1	1	—	—	0	1	1	1
Montana <sup>¶</sup>	2	2	28	125	180	—	0	1	1	—	—	0	0	—	—
Nevada <sup>¶</sup>	N	0	0	N	N	—	0	4	12	—	—	0	2	4	2
New Mexico <sup>¶</sup>	—	1	4	38	92	—	0	1	4	21	—	0	0	—	4
Utah	—	3	26	170	306	—	0	1	1	1	—	0	1	2	1
Wyoming <sup>¶</sup>	—	0	3	8	19	—	0	1	1	2	—	0	1	2	4
<b>Pacific</b>	—	2	6	107	106	—	0	17	107	73	—	0	7	43	40
Alaska	—	1	4	59	41	—	0	0	—	—	—	0	0	—	—
California	—	0	2	9	32	—	0	17	107	72	—	0	7	43	39
Hawaii	—	1	4	39	33	—	0	0	—	—	—	0	0	—	—
Oregon	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
Washington	N	0	0	N	N	—	0	0	—	1	—	0	0	—	1
<b>Territories</b>															
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	1	4	16	25	—	0	0	—	—	—	0	0	—	—
Puerto Rico	2	4	14	174	579	—	0	0	—	—	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Case counts for reporting year 2011 are provisional and subject to change. For further information on interpretation of these data, see [http://www.cdc.gov/osels/ph\\_surveillance/ndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf](http://www.cdc.gov/osels/ph_surveillance/ndss/phs/files/ProvisionalNationalNotifiableDiseasesSurveillanceData20100927.pdf). Data for TB are displayed in Table IV, which appears quarterly.

† Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for California serogroup, eastern equine, Powassan, St. Louis, and western equine diseases are available in Table I.

§ Not reportable in all states. Data from states where the condition is not reportable are excluded from this table, except starting in 2007 for the domestic arboviral diseases and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at [http://www.cdc.gov/osels/ph\\_surveillance/ndss/phs/infdiss.htm](http://www.cdc.gov/osels/ph_surveillance/ndss/phs/infdiss.htm).

¶ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Morbidity and Mortality Weekly Report

TABLE III. Deaths in 122 U.S. cities,\* week ending November 19, 2011 (46th week)

Reporting area	All causes, by age (years)						P&I†	Reporting area (Continued)	All causes, by age (years)						P&I†
	All Ages	≥65	45-64	25-44	1-24	<1			Total	All Ages	≥65	45-64	25-44	1-24	
<b>New England</b>	592	416	130	25	14	7	41	<b>S. Atlantic</b>	1,087	692	286	62	24	23	62
Boston, MA	153	94	40	10	4	5	13	Atlanta, GA	147	84	44	11	4	4	4
Bridgeport, CT	46	35	9	1	1	—	12	Baltimore, MD	123	69	42	4	5	3	7
Cambridge, MA	20	19	1	—	—	—	1	Charlotte, NC	103	78	16	8	1	—	5
Fall River, MA	32	24	6	2	—	—	—	Jacksonville, FL	34	19	12	3	—	—	4
Hartford, CT	52	37	10	3	2	—	6	Miami, FL	130	85	33	7	2	3	8
Lowell, MA	27	19	8	—	—	—	1	Norfolk, VA	50	31	11	4	4	—	1
Lynn, MA	7	4	3	—	—	—	—	Richmond, VA	74	45	22	5	2	—	7
New Bedford, MA	26	17	7	2	—	—	—	Savannah, GA	55	37	14	1	—	3	8
New Haven, CT	29	16	10	1	2	—	1	St. Petersburg, FL	61	37	18	2	—	4	2
Providence, RI	72	56	11	3	2	—	1	Tampa, FL	193	131	44	12	3	3	9
Somerville, MA	1	1	—	—	—	—	—	Washington, D.C.	103	65	27	5	3	3	7
Springfield, MA	24	14	7	2	1	—	1	Wilmington, DE	14	11	3	—	—	—	—
Waterbury, CT	38	34	4	—	—	—	—	<b>E.S. Central</b>	1,038	688	259	56	21	14	70
Worcester, MA	65	46	14	1	2	2	5	Birmingham, AL	186	127	42	11	3	3	9
<b>Mid. Atlantic</b>	2,636	1,758	613	171	44	49	120	Chattanooga, TN	83	60	16	5	1	1	3
Albany, NY	31	25	4	—	1	1	—	Knoxville, TN	125	88	30	3	4	—	9
Allentown, PA	23	16	4	2	1	—	2	Lexington, KY	69	53	13	1	2	—	1
Buffalo, NY	62	40	15	5	1	1	6	Memphis, TN	244	158	60	16	4	6	24
Camden, NJ	35	16	14	3	2	—	2	Mobile, AL	113	66	33	10	2	2	4
Elizabeth, NJ	15	9	2	3	—	1	1	Montgomery, AL	43	32	10	—	1	—	1
Erie, PA	64	46	15	2	1	—	3	Nashville, TN	175	104	55	10	4	2	19
Jersey City, NJ	8	4	4	—	—	—	1	<b>W.S. Central</b>	1,270	794	312	74	57	32	57
New York City, NY	1,049	752	210	68	7	11	52	Austin, TX	94	55	26	8	5	—	3
Newark, NJ	24	19	2	2	1	—	1	Baton Rouge, LA	64	44	14	4	2	—	—
Paterson, NJ	20	14	4	2	—	—	—	Corpus Christi, TX	53	39	9	3	1	1	6
Philadelphia, PA	939	554	269	63	23	30	36	Dallas, TX	196	116	53	7	14	6	9
Pittsburgh, PA <sup>§</sup>	49	40	8	—	—	1	4	El Paso, TX	103	69	19	9	6	—	2
Reading, PA	23	19	2	1	1	—	—	Fort Worth, TX	U	U	U	U	U	U	U
Rochester, NY	97	60	25	7	2	3	—	Houston, TX	141	65	42	9	12	12	6
Schenectady, NY	20	15	3	1	1	—	2	Little Rock, AR	105	69	27	3	1	5	2
Scranton, PA	25	21	4	—	—	—	2	New Orleans, LA	U	U	U	U	U	U	U
Syracuse, NY	88	69	12	5	2	—	5	San Antonio, TX	288	184	74	17	9	4	15
Trenton, NJ	23	9	6	7	—	1	—	Shreveport, LA	94	66	18	5	1	4	5
Utica, NY	11	5	6	—	—	—	—	Tulsa, OK	132	87	30	9	6	—	9
Yonkers, NY	30	25	4	—	1	—	3	<b>Mountain</b>	1,237	850	267	69	28	22	65
<b>E.N. Central</b>	1,993	1,361	450	108	37	37	147	Albuquerque, NM	149	95	38	8	7	1	10
Akron, OH	55	41	8	1	1	4	5	Boise, ID	65	51	9	4	—	1	3
Canton, OH	37	28	6	2	1	—	3	Colorado Springs, CO	88	66	10	7	4	1	4
Chicago, IL	219	147	48	13	7	4	19	Denver, CO	82	56	19	3	1	3	3
Cincinnati, OH	99	57	29	8	—	5	10	Las Vegas, NV	245	172	53	14	3	3	20
Cleveland, OH	278	208	57	7	2	4	20	Ogden, UT	39	24	14	1	—	—	2
Columbus, OH	154	104	40	7	1	2	17	Phoenix, AZ	163	100	39	11	4	8	5
Dayton, OH	157	123	31	3	—	—	4	Pueblo, CO	35	22	12	1	—	—	1
Detroit, MI	140	82	41	10	5	2	—	Salt Lake City, UT	163	110	36	9	4	4	6
Evansville, IN	49	33	12	2	1	1	5	Tucson, AZ	208	154	37	11	5	1	11
Fort Wayne, IN	67	48	14	1	2	2	5	<b>Pacific</b>	1,898	1,293	421	108	39	37	142
Gary, IN	13	6	3	3	—	1	1	Berkeley, CA	11	8	2	—	1	—	—
Grand Rapids, MI	60	40	14	3	1	2	5	Fresno, CA	158	108	33	10	3	4	10
Indianapolis, IN	192	119	50	17	2	4	19	Glendale, CA	42	29	9	3	1	—	3
Lansing, MI	60	38	16	5	1	—	2	Honolulu, HI	54	41	8	3	1	1	4
Milwaukee, WI	76	46	18	9	1	2	2	Long Beach, CA	67	43	20	2	1	1	6
Peoria, IL	59	44	9	1	4	1	10	Los Angeles, CA	275	175	60	27	7	6	26
Rockford, IL	58	40	14	1	3	—	6	Pasadena, CA	25	19	4	1	—	1	2
South Bend, IN	60	42	10	5	1	2	4	Portland, OR	165	112	35	9	3	6	6
Toledo, OH	91	65	15	8	3	—	6	Sacramento, CA	250	184	51	10	3	2	22
Youngstown, OH	69	50	15	2	1	1	4	San Diego, CA	199	127	48	16	3	5	21
<b>W.N. Central</b>	717	447	198	37	19	15	49	San Francisco, CA	121	86	31	1	2	1	8
Des Moines, IA	72	48	20	2	1	1	6	San Jose, CA	207	149	41	7	4	6	15
Duluth, MN	31	27	4	—	—	—	9	Santa Cruz, CA	35	28	6	1	—	—	4
Kansas City, KS	24	13	7	3	1	—	2	Seattle, WA	117	65	31	13	7	1	5
Kansas City, MO	101	69	23	4	3	2	4	Spokane, WA	82	52	23	4	1	2	5
Lincoln, NE	47	32	12	1	—	2	5	Tacoma, WA	90	67	19	1	2	1	5
Minneapolis, MN	63	29	23	7	1	3	3	<b>Total¶</b>	<b>12,468</b>	<b>8,299</b>	<b>2,936</b>	<b>710</b>	<b>283</b>	<b>236</b>	<b>753</b>
Omaha, NE	100	72	20	3	4	1	7								
St. Louis, MO	134	58	50	13	8	4	4								
St. Paul, MN	62	40	20	1	—	1	4								
Wichita, KS	83	59	19	3	1	1	5								

U: Unavailable. —: No reported cases.

\* Mortality data in this table are voluntarily reported from 122 cities in the United States, most of which have populations of >100,000. A death is reported by the place of its occurrence and by the week that the death certificate was filed. Fetal deaths are not included.

† Pneumonia and influenza.

§ Because of changes in reporting methods in this Pennsylvania city, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks.

¶ Total includes unknown ages.

## Morbidity and Mortality Weekly Report

The *Morbidity and Mortality Weekly Report (MMWR)* Series is prepared by the Centers for Disease Control and Prevention (CDC) and is available free of charge in electronic format. To receive an electronic copy each week, visit *MMWR*'s free subscription page at <http://www.cdc.gov/mmwr/mmwrsubscribe.html>. Paper copy subscriptions are available through the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402; telephone 202-512-1800.

Data presented by the Notifiable Disease Data Team and 122 Cities Mortality Data Team in the weekly *MMWR* are provisional, based on weekly reports to CDC by state health departments. Address all inquiries about the *MMWR* Series, including material to be considered for publication, to Editor, *MMWR* Series, Mailstop E-90, CDC, 1600 Clifton Rd., N.E., Atlanta, GA 30333 or to [mmwrq@cdc.gov](mailto:mmwrq@cdc.gov).

All material in the *MMWR* Series is in the public domain and may be used and reprinted without permission; citation as to source, however, is appreciated.

Use of trade names and commercial sources is for identification only and does not imply endorsement by the U.S. Department of Health and Human Services.

References to non-CDC sites on the Internet are provided as a service to *MMWR* readers and do not constitute or imply endorsement of these organizations or their programs by CDC or the U.S. Department of Health and Human Services. CDC is not responsible for the content of these sites. URL addresses listed in *MMWR* were current as of the date of publication.

U.S. Government Printing Office: 2012-523-043/21091 Region IV ISSN: 0149-2195