



Communicable Disease Branch Local Health Department Monthly Webinar Key Points – June 10, 2025

The North Carolina Division of Public Health (NC DPH) Communicable Disease Branch will be releasing key points that include information discussed on the monthly Tuesday Local Health Department call. Please use the information below as a summary of the topics presented on the call. As guidance changes, please use the most recent information provided. For questions, contact the NC DPH Communicable Disease Branch 24/7 Epidemiologist on Call at **919-733-3419**.

Important Updates

- Available online at [NC Communicable Disease Manual - Other Diseases of Public Health Significance \(ncdhhs.gov\)](https://ncdhhs.gov)
- **New:** NCDHHS LHD Monthly Webinar 06-10-2025

Video recording: <https://vimeo.com/manage/videos/1092505651/e6042bfcd8>

Legionellosis documents mentioned during the call:

- CDC extended form for Legionellosis (*link:* <https://www.cdc.gov/investigate-legionella/media/pdfs/extended-case-form.pdf>)
- NCSLPH Memo & Provider memo that went out (*attached*)

Questions & Answers

Q. Hi, I have not rec'd any information for the TATP on rabies and vectorborne infections. How can I get the information to register?

A. The webinar is this Thursday at 10 am. Here is the link. https://teams.microsoft.com/l/meetup-join/19%3ameeting_OTk3MzMxNzgtNDEzZC00MDA4LWI5NWMTYjVmMDIyYjY5MWRI%40thread.v2/0?context=%7b%22Tid%22%3a%227a7681dc-b9d0-449a-85c3-ecc26cd7ed19%22%2c%22Oid%22%3a%22f758ab65-19e0-4cdc-947c-700f5bc1a8c1%22%7d

Q. Where is the CDC extended case form located?

A. Please email Nicole Lee or Tammra Morrison for the case form. nicole.lee@dhhs.nc.gov and tammra.morrison@dhhs.nc.gov. If this is for Legionella, here is a link: <https://www.cdc.gov/investigate-legionella/media/pdfs/extended-case-form>

Also, the link to the form will be on the slides that will be available later.

Q. Could you address the situation with RFK and removing the experts on a vaccine advisory committee?

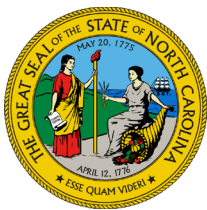
A. To be fully transparent we do not have any other information than what was reported last night via the media. As we learn more, we will certainly share that information. For now, we will continue to follow the ACIP recommendations already in place and our NC Immunization General Statutes and Administrative Rules. I want to thank everyone for your patience as we navigate through this time of change and uncertainty.

Q. How can we get a new CD nurse to be added to the lists to get emails?

A. Please email Vanessa Gailor (vanessa.gailor@dhhs.nc.gov) to get the new nurse added.

Next Meeting

Tuesday, July 8, 2025 - 1:00 p.m.



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Public Health

JOSH STEIN • Governor

DEV DUTTA SANGVAI • Secretary

DEBRA FARRINGTON • Deputy Secretary for Health

KELLY KIMPLE • Director, Division of Public Health

SCOTT M. SHONE, PhD, HCLD (ABB) • Laboratory Director, State
Laboratory of Public Health

Memo

To: North Carolina Clinical Laboratories

From: Scott M. Shone, PhD, HCLD (ABB), Laboratory Director
William A. Glover, PhD, D(ABMM), MLS(ASCP), Assistant Laboratory Director
for Infectious Diseases

Date: June 5, 2025

Re: Legionella Guidance and North Carolina State Laboratory of Public Health
(NCSLPH) Resources

As we move into the warmer months in North Carolina, laboratories should remain alert for cases of Legionnaires' disease. When feasible, a lower respiratory specimen and urine for *Legionella* urinary antigen testing should be obtained concurrently. The NCSLPH asks that laboratories performing *Legionella* culture on lower respiratory specimens submit *Legionella* isolates to NCSLPH for potential cluster investigations and epidemiologic linkages to environmental samples. *Legionella* isolates should be shipped in a container that meets safety requirements. Agar slants are preferred.

NCSLPH also performs *Legionella* culture and DFA (direct fluorescent antibody) staining for clinical specimens. Clinical specimens including sputum, pleural fluid, lung biopsy tissue, bronchial washings and lavages, and tracheal aspirates should be shipped to NCSLPH in leak-proof containers with frozen ice packs for receipt within 3 days of collection. If there is a delay in shipping specimens to NCSLPH, specimens must be frozen and shipped on dry ice in an insulated container via commercial courier.

All submissions must be accompanied by a [Special/Atypical Bacteriology Specimen Submission form](#). Additional information about submission criteria and shipping can be found on pages 152-153 of the [NCSLPH SCOPE: A Guide to Laboratory Services](#).

For questions, contact Thomas Lawson, Microbiology Unit Manager, at 919-807-8803 or Joyce Knutsen, Bacteriology Supervisor, at 919-807-8793.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF PUBLIC HEALTH • STATE LABORATORY OF PUBLIC HEALTH

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NC DEPARTMENT OF
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KAREN BURKES • Acting Deputy Secretary for Health

KELLY KIMPLE • Acting Director, Division of Public Health

To: All North Carolina Clinicians

From: Erica Wilson, MD, MPH, Medical Epidemiologist

Subject: Increase in Legionnaires' Disease Cases

Date: June 9, 2025

The North Carolina Division of Public Health is making clinicians aware of an increase in cases of Legionnaires' disease during April and May. The increase has been detected across a broad geographic area and has not been linked to a single source or exposure; however, multiple cluster investigations are ongoing.

Legionnaires' disease is caused by inhalation of aerosolized water or mist containing *Legionella* bacterium. *Legionella* occurs naturally in the environment, however most cases occur when the bacteria grows and spreads in human-made water systems. Clinicians should be aware of the increase in cases of Legionnaires' disease and follow these recommendations:

- Consider testing for Legionnaires' disease in cases of community-acquired pneumonia, especially those residing in high-risk settings such as long term care facilities where cluster detection is critical.
- [The preferred diagnostic tests](#) for Legionnaires' disease are *Legionella* urinary antigen test **AND** paired culture of lower respiratory specimens. Cultures are beneficial for two reasons:
 - Urinary antigen tests only detect *Legionella pneumophila* serogroup 1 infections.
 - Culture is critical in establishing links in clusters and outbreaks.
- Please submit specimens to the North Carolina State Laboratory of Public Health (NCSLPH) for cluster investigation and linkage to environmental samples. NCSLPH accepts:
 - Clinical specimens include sputum, pleural fluid, lung biopsy tissue, bronchial washings and lavages, and tracheal aspirates for culture and DFA.
 - Isolates for further characterization.
 - Additional information about submission criteria and shipping can be found on pages 152-153 of the [NCSLPH SCOPE: A Guide to Laboratory Services](#).

For questions on reporting and investigation of Legionnaires' diseases cases, please contact the Communicable Disease on-call line at 919-733-3419.

For additional resources:

- [Clinical Guidance for Legionella Infections](#)
- [Factsheets for Healthcare providers](#)

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