



<p><b>Date Sent: 12/13/19      Number of Pages: 2</b></p>	<p align="center"><b>Providing Excellent Public Health Services for Everyone, Everywhere, Everyday!</b></p> <p><b>Promoting &amp; Offering:</b></p> <ul style="list-style-type: none"> <li>▪ Child &amp; Adult Immunizations</li> <li>▪ Child Health Clinic</li> <li>▪ Dental Services</li> <li>▪ Flu Shot Clinics</li> <li>▪ Family Planning Services</li> <li>▪ Prenatal/Maternal Health Services</li> <li>▪ Providing Laboratory Services</li> <li>▪ STD Services</li> <li>▪ Women Infants and Children Nutrition Services</li> </ul> <p><b>Physicals:</b></p> <ul style="list-style-type: none"> <li>▪ Sports</li> <li>▪ Work</li> <li>▪ College</li> <li>▪ DOT</li> <li>▪ Women's Health</li> </ul> <p><b>Health Assessment and Planning:</b></p> <ul style="list-style-type: none"> <li>▪ Evaluating County Health Status</li> <li>▪ Monitoring &amp; Reducing Health Hazards</li> <li>▪ Reducing Specific Disease and Injury</li> <li>▪ Providing Emergency Preparedness and Response</li> <li>▪ Issuing Health Advisories &amp; News Releases</li> <li>▪ Implementing Policies, Processes, and Environmental Changes to Improve Health</li> <li>▪ Providing Health Education &amp; Information</li> <li>▪ Planning Partnerships with Health Care Providers</li> <li>▪ Improving Healthy Eating, Active Living and Tobacco-free Living</li> <li>▪ Improving Access to Health Care</li> </ul> <p><b>Environmental Health:</b></p> <ul style="list-style-type: none"> <li>▪ Ensuring Water Quality</li> <li>▪ Monitoring Waste Disposal</li> <li>▪ Fighting Pollution</li> <li>▪ Ensuring Sanitation</li> <li>▪ Enforcing Health and Safety Codes</li> </ul>
<p><b>To: Local Medical Community</b></p> <p><b>Company:</b></p> <p><b>Fax Number: sent blast fax</b></p>	
<p><b>From: Iredell County Health Department</b></p> <p><b>Title: Fax Number: 704-871-3474</b></p> <p><b>Phone Number: 704-878-5300</b></p>	
<p><b>Confidential:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>Urgent:</b>      <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>Sending Division:</b>   <input type="checkbox"/> Executive   <input type="checkbox"/> Administration  <input checked="" type="checkbox"/> Clinical Services   <input type="checkbox"/> Environmental Health  <input type="checkbox"/> Development &amp; Promotion</p>	
<p><b>Message from NC DHHS:</b></p> <p>The CDC notified the NC DHHS about a national increase in cases of disseminated gonococcal infections (DGI). Below are some recommendations for clinicians if there is a clinical suspicion for DGI.</p>	

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NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

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Division of Public Health

**To:** North Carolina Clinicians and Laboratorians

**From:** Victoria Mobley, MD MPH, HIV/STD Medical Director  
Scott Shone, PhD, HCLD(ABB), Director, NC State Laboratory of Public Health

**Subject:** National Increase in Disseminated Gonococcal Infection

12/10/2019

Dear Colleagues,

On December 5, 2019, the Centers for Disease Control and Prevention notified the North Carolina Division of Public Health about a national increase in cases of disseminated gonococcal infections (DGI). DGI occurs when the sexually transmitted pathogen *Neisseria gonorrhoeae* invades the bloodstream and spreads to distant sites in the body, leading to clinical findings such as septic arthritis, polyarthralgia, tenosynovitis, petechial/pustular skin lesions, bacteremia, or, on rare occasions, endocarditis or meningitis. DGI is uncommon and thought to occur in 0.5-3% of untreated gonorrhea cases. Cultures from disseminated sites of infection are often negative and mucosal sites of infection (e.g. urogenital, rectal, or pharyngeal) are often asymptomatic and not tested before empiric antimicrobial treatment is started despite having a higher diagnostic yield. As a result, DGI is usually a clinical diagnosis without microbiologic confirmation, which likely contributes to underdiagnosis and treatment delays.

While North Carolina has experienced a 58% increase in reported gonorrhea cases during 2014-2018, we have not observed an increase in the reports of potential DGI cases, which continue to represent approximately 0.5-1% of untreated gonococcal infections.

#### **Recommendations for Clinicians**

If there is clinical suspicion for DGI, clinicians are asked to:

- Obtain both nucleic acid amplification testing (NAAT) and culture specimens from the disseminated site(s) of infection- e.g., skin, synovial fluid, blood, or CSF.
- Obtain both NAAT and culture specimens from all urogenital and extragenital sites where exposure might have occurred (based on a thorough sexual history).
- Request antimicrobial susceptibility testing of all *N. gonorrhoeae* isolates from patients with known or suspected DGI.
- Utilize the [CDC STD Treatment Guidelines \(https://www.cdc.gov/std/tg2015/gonorrhea.htm\)](https://www.cdc.gov/std/tg2015/gonorrhea.htm), in conjunction with an infectious disease consultation, to manage DGI cases.
- Report all suspected DGI cases to your local health department using NC Division of Public Health Communicable Disease Report [form \(https://epi.dph.ncdhhs.gov/cd/docs/dhhs\\_2124.pdf\)](https://epi.dph.ncdhhs.gov/cd/docs/dhhs_2124.pdf). Local health department contact information is available at <https://www.ncdhhs.gov/divisions/public-health/county-health-departments>.

**NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF PUBLIC HEALTH**

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AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

Clinical consultation for DGI management is available through the [STD Clinical Consultation Network \(https://www.stdccn.org/\)](https://www.stdccn.org/). Please contact the Communicable Disease Branch with any questions regarding the reporting of potential DGI cases, (919) 733-3419.

**Recommendations for Local, Clinical, and Commercial laboratories**

- Send all clinical isolates or subcultures from suspected DGI cases to the North Carolina State Laboratory of Public Health (NCSLPH).
- Isolates should be sent to NCSLPH on Chocolate slants with fresh growth (24 to 48 hours old). If culture plates are >48 hours old, they must be subcultured, incubated, and sent once fresh growth is present.
- Slant cultures should be overlaid with sterile broth (such as infusion broth) to within one inch of the top of the tube, sealed with tape, and placed in a leak-proof container before shipping to help preserve organism viability.
- Complete the entire [NCSLPH Atypical Bacteriology Form 4121 \(https://slph.ncpublichealth.com/Forms/4121-SpecAtypBact-20170808.pdf\)](https://slph.ncpublichealth.com/Forms/4121-SpecAtypBact-20170808.pdf) in addition to indicating "GC Culture Suspect DGI", and examine for GC within specimen type section, and list any antimicrobial susceptibility testing (AST) results within the "Other" section of the form (see example below).
- Plainly label GC culture "suspect DGI" and "DO NOT REFRIGERATE" on the outside of the package, and address to "Atypical Bacteriology" and include completed NCSLPH Atypical Bacteriology Form 4121.
- Do not ship on Fridays, weekends, or State holidays.
- The submitting laboratory should maintain an additional culture in the event the isolate does not survive shipment.
- Questions can be directed to the NCSLPH Atypical Bacteriology bench at (919)807-8606.

<b>Specimen</b>	Collection Date: _____	Reason for Testing (ICD-10 Dx Code): _____
	<b>Specimen Type:</b> <input checked="" type="checkbox"/> Isolated Organism (describe): _____ <span style="color: red; font-weight: bold; font-size: 1.2em;">GC Culture Suspect DGI</span> <input type="checkbox"/> Smear <input type="checkbox"/> Clinical	<b>Specimen Source:</b> <input type="checkbox"/> Blood <input type="checkbox"/> NP <input type="checkbox"/> Bronchial Wash <input type="checkbox"/> CSF <input type="checkbox"/> Bronchial Lavage <input type="checkbox"/> Bronchial Brush <input type="checkbox"/> Urine <input type="checkbox"/> Throat/Pharyngeal <input type="checkbox"/> Sputum <input type="checkbox"/> Sterile Body Fluid Site: _____ <input type="checkbox"/> Wound Site: _____ <input type="checkbox"/> Genital Site: _____ <input type="checkbox"/> Other: _____
	<b>Examine For:</b> <input type="checkbox"/> Presumptive GC for confirmation <input type="checkbox"/> Legionella DFA <input checked="" type="checkbox"/> GC <input type="checkbox"/> Legionella Culture <input type="checkbox"/> GC susceptibility <input type="checkbox"/> Listeria <input type="checkbox"/> N. meningitides Group <input type="checkbox"/> Vibrio <input type="checkbox"/> H. influenza Type <input type="checkbox"/> Reference ID** <input type="checkbox"/> Bordetella PCR                      (fill out information below) <input type="checkbox"/> Bordetella Culture	Laboratory Number: _____  <div style="text-align: right;"><i>Do Not Write in this Space</i></div>
<b>Other</b>	<b>**For Reference ID: describe organism, including biochemical reactions: <span style="color: red; font-weight: bold; font-size: 1.2em;">ANY AST RESULTS</span></b> _____ _____	