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Dear Provider,

This letter is to request that healthcare providers seek laboratory confirmation on all clinically diagnosed cases of chickenpox. This will assist with the appropriate Public Health response as cases and outbreaks of chickenpox continue to occur in Michigan.

Chickenpox is easily spread in household and group settings, such as day care centers, schools, camps, colleges, and workplaces. The Public Health response to these cases has implications not only for the individual but also for their contacts. To limit the spread of disease, public health authorities will exclude cases from group settings for several days and exclude unimmunized contacts from group settings for 21 days after exposure to a chickenpox case. In addition, there is a risk of serious complications among people with weakened immune systems and adolescents and adults who are exposed to and contract chickenpox.

Laboratory confirmation of a chickenpox diagnosis is now strongly encouraged and increasingly important as healthcare providers have less clinical experience with the disease due to the overall decline in disease incidence in recent decades.

The test method of choice for rapid diagnosis and confirmation of chickenpox is the varicella-specific nucleic acid detected by polymerase chain reaction (PCR). Please see the table below for testing information.

Preferred Test Method*	Specimen(s)	Timing for Specimen Collection	Testing Logistics & Considerations
PCR	Vesicular fluid by swabbing base of vesicle; scabs, or lesion crusts.	2-3 days after rash onset	Not available at MDHHS (specimens can be sent to CDC via MDHHS); testing is available at many hospital clinical laboratories and at commercial clinical laboratories.

*For other testing options for varicella see: <https://wwwn.cdc.gov/nndss/conditions/varicella/case-definition/2010/>

In addition, health care provider diagnosis of chickenpox can be documented as immunity in the Michigan Care Improvement Registry (MCIR). To report immunity to chickenpox, including those presenting with atypical and/or mild disease, one of the following should be sought:

- 1) Evidence of laboratory confirmation, OR
- 2) An epidemiologic link to a laboratory confirmed chickenpox case

When such documentation is lacking, people should NOT be considered as having a valid history of disease, because other diseases may mimic mild atypical chickenpox.

Chickenpox is a notifiable disease in Michigan. Cases and outbreaks are required to be reported to your local health department.

If you have any questions about this information please contact a public health nurse by calling our Van Buren office at (269) 621-3143 or our Cass office at (269) 782-0064.

Thank you,

Larry Wile, MD

Resources:

MDHHS Vaccine Preventable Disease Investigation Guidelines – Varicella

http://www.michigan.gov/documents/mdch/Varicella_388985_7.pdf

Prevention of Varicella: Recommendations of the ACIP

<http://www.cdc.gov/mmwr/pdf/rr/rr5604.pdf>