In NORTHCOM during week 09\textsuperscript{1,2}

\begin{itemize}
  \item Influenza activity decreased to low to moderate for most of the country.
  \item The percentage of outpatient visits due to ILI continued to decrease and dropped below previous seasons, but remained above baseline.
  \item The percentage of positive lab tests remained dropped to 15.5\% for service members and 28.0\% for beneficiaries.
  \item A/H3N2 continued to predominate over A/H1N1.
  \item One service member and 2 other beneficiary influenza hospitalizations (RMEs) were reported for week 9.
\end{itemize}

\begin{itemize}
  \item NHRC laboratory-confirmed influenza cases, US Military Basic Trainees: As of Week 08
\end{itemize}
In EUCOM during week 09, influenza activity was minimal to low across EUCOM. The percentage of outpatient visits due to ILI decreased below previous seasons and was at baseline. The percentage of positive lab tests remained high at 23.1% for service members and 22.2% for beneficiaries for week 09. A/H3N2 continued to predominate over A/H1N1.
In PACOM during week 09¹,⁶,⁷

- Influenza activity remained minimal in Japan and Guam, but low activity was seen for the ROK and Hawaii.
- The percentage of outpatient visits increased to baseline and was similar to previous seasons.
- The percentage of positive lab tests decreased to 3.0% for service members, but remained high at 23.1% for other beneficiaries during week 09.
- Among the influenza A specimens subtyped, A/H3N2 continued to be the predominating subtype.

### PACOM: Guam and Hawaii Influenza Activity and HL7 Test Positive (MAP: SM+BN, 2 wks)

<table>
<thead>
<tr>
<th>Area Name</th>
<th>Influenza Activity</th>
<th>HL7 Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>A(H1)</td>
</tr>
<tr>
<td>Guam</td>
<td>Minimal</td>
<td>0</td>
</tr>
<tr>
<td>Hawaii*</td>
<td>Low</td>
<td>0</td>
</tr>
</tbody>
</table>

*Hawaii HL7 Type counts may include samples received from Guam, but tested in Hawaii

### 2016-2017 PACOM Season Totals¹,⁶,⁷

<table>
<thead>
<tr>
<th></th>
<th>A/H1N1</th>
<th>A/H3N2</th>
<th>A/Untyped</th>
<th>Flu B</th>
<th>Flu AB</th>
<th>Overall % Positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Members</td>
<td>0</td>
<td>51</td>
<td>70</td>
<td>8</td>
<td>1</td>
<td>12.77</td>
</tr>
<tr>
<td>Dependents</td>
<td>10</td>
<td>148</td>
<td>223</td>
<td>69</td>
<td>2</td>
<td>25.13</td>
</tr>
</tbody>
</table>

¹AFHSB, ²USAFSAM, ³NHRC, ⁴LRMC, ⁵PHCR-E, ⁶AFRIMS, ⁷NMRC-A, ⁸NAMRU-3, ⁹NAMRU-6

For inquiries or comments please contact dha.ncr.health-surv.mbx.afhs-commcenter@mail.mil
In CENTCOM and AFRICOM during week 09\(^1,8\)

- DMSS continues to have missing TMDS data for weeks 06-09, so caution should be used in interpreting these data.
- Influenza activity was minimal for locations with available data in CENTCOM.
- The percentage of outpatient visits due to ILI continued to decreased and was below baseline and previous seasons.

In SOUTHCOM during week 09\(^9\)

- DMSS continues to have missing TMDS data for weeks 06-09, so caution should be used in interpreting these data.
- Influenza activity was minimal in Honduras this week based on DMSS data.

\(^1\)AFHSB, \(^2\)USAFSAM, \(^3\)NHRC, \(^4\)LRMC, \(^5\)PHCR-E, \(^6\)AFRIMS, \(^7\)NMRC-A, \(^8\)NAMRU-3, \(^9\)NAMRU-6

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Description:
Maps, figures and tables are stratified by Combatant Commands (CCMD). The map provides a measure of influenza activity by state or country within each CCMD for the past two weeks for service members. Influenza activity is defined by the percentage of outpatient visits associated with an Influenza-like Illness (ILI) for each week compared to baseline levels of influenza activity. Additionally, a pie graph by US region or country is generated to display the distribution of influenza types and subtype identified from positive laboratory tests for the past two weeks combined.

Influenza activity: Percentage of Outpatient Visits Associated with ILI:
The percentage of all outpatient visits for ILI is calculated each week for all service members, regardless of component. These data are presented as a map of the past two weeks’ activity and a figure to display the entire season’s data compared to the two prior seasons and baseline. For the map, the activity level compares the mean reported percent of visits due to ILI for the past two weeks to the mean reported percent of visits due to ILI during baseline weeks. Baseline weeks are defined as non-influenza weeks (weeks 22-39) over the past 3 years.

There are four activity levels reported on each map. The activity level corresponds to the number of standard deviations (SD) below, at or above the mean for the current week compared to the mean of the baseline weeks. Activity levels are classified as minimal, low, moderate, and high. Minimal activity corresponds to an influenza percentage that is less than 2 SD above the mean. Low activity corresponds to an influenza percentage that is equal to or greater than 2 SD above the mean, but less than 4 SD above the mean. Moderate activity corresponds to an influenza percentage that is equal to or greater than 4 SD above the mean, but less than 6 SD above the mean. High activity corresponds to an influenza percentage that is equal to or greater than 6 SD above the mean.

Influenza Positive Specimens:
Lab results from PCR, viral culture, and rapid influenza assays are reported. Although the inclusion of rapid tests may underestimate the weekly and cumulative percent positive estimates due to false negatives, visibility of the positive rapid results provides valuable information for this surveillance report. Influenza types/subtypes are categorized as influenza A not subtyped (A subtype na), influenza A/H1 (A H1), influenza A/H3 (A H3), influenza A and B co-infection (A B), and influenza B (B).

Map: Each US region or country with available data contains a pie chart that displays the distribution of influenza types and subtypes for that area for the past two weeks combined. Two weeks of data are combined instead of using just the current week’s data due to delays in reporting of laboratory results.

Figure and Table: Each week, using the total number of influenza laboratory tests performed and the positive test results, the proportions positive for each serotype of influenza are calculated for service members and dependents separately.

Data Sources and Case Definitions:
Medical encounter and demographic data from the Armed Forces Health Surveillance Branch’s (AFHSB) Defense Medical Surveillance System (DMSS) are used to generate this report. In addition, health-level 7 (HL-7) format laboratory data is provided by the Navy and Marine Corps Public Health Center (NMCPHC) EpiData Center Division. For the past seasons and baseline calculations, ICD-9 codes from outpatient encounters are used to identify influenza activity. The outcome of influenza activity based on ICD-9 codes is defined using the combined codes for ILI (79.99, 382.9, 460, 461.9, 465.8, 465.9, 466.0, 486, 487.0, 487.1, 487.8, 488, 490, 780.6, or 786.2). For the current season, ICD-10 codes from outpatient encounters are used to identify influenza activity. The outcome of influenza activity based on ICD-10 codes is defined using the combined codes for ILI (B97.89, H66.9, H66.90, H66.91, H66.92, H66.93, J00, J01.9, J01.90, J06.9, J09, J09.X, J09.X1, J09.X2, J09.X3, J09.X9, J10, J10.0, J10.00, J10.01, J10.08, J10.1, J10.2, J10.8, J10.81, J10.82, J10.83, J10.89, J11, J11.0, J11.00, J11.08, J11.1, J11.12, J11.18, J11.81, J11.82, J11.83, J11.89, J12.89, J12.9, J18, J18.1, J18.8, J18.9, J20.9, J40, R05, R50.9). An individual can only be counted as a case once per week.

NORTHCOM Regions:

(All data are preliminary and subject to change as updated data is received)

1 AFHSB, 2 USAFSAM, 3 NHRC, 4 LRMC, 5 PHCR-E, 6 AFRIMS, 7 NMRC-A, 8 NAMRU-3, 9 NAMRU-6
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