

Severe Respiratory Illness (SRI)

Revision Dates

Case Definition	March 2011
Reporting Requirements	July 2018

Case Definition

Confirmed Case

A person admitted to hospital with:

- Respiratory symptoms, i.e., fever (over 38° Celsius) and new onset of (or exacerbation of chronic) cough or breathing difficulty

AND

Evidence of severe illness progression:

- Radiographic evidence of infiltrates consistent with pneumonia or acute respiratory distress syndrome (ARDS)^(A)

OR

- Complications such as encephalitis or other severe and life threatening complications

AND

- No alternate diagnosis with no response to treatment in the first 72 hours of hospitalization; (i.e., results of preliminary clinical and/or laboratory investigations^(B) within the first 72 hours of hospitalization with no response to treatment and cannot ascertain a diagnosis that reasonably explains the illness [i.e., have ruled out presence of a known viral or bacterial respiratory pathogen]).

OR

A deceased person with:

- A history of respiratory symptoms (including fever and new onset of [or exacerbation of chronic] cough or breathing difficulty) resulting in death

AND

- Autopsy findings consistent with the pathology of ARDS^(A) without an identifiable cause

AND

- No alternate diagnosis that reasonably explains the illness.

^(A) Documentation of evidence of ARDS should be noted on either the radiologist's or medical examiner's report.

^(B) It is suggested that laboratory investigation, including laboratory testing for influenza and other respiratory pathogens should be started as soon as possible upon presentation (i.e., do not wait 72 hours to initiate testing).

Reporting Requirements

1. Physicians, Health Practitioners and Others

Physicians, health practitioners and others shall notify the Medical Officer of Health (MOH) (or designate) of the zone, of all confirmed cases of SRI in the prescribed form by the fastest means possible (FMP).

2. Alberta Health Services and First Nations and Inuit Health Branch

- The MOH (or designate) of the zone where the case currently resides shall notify the Chief Medical Officer of Health (CMOH) (or designate) by FMP of all confirmed cases.
- The MOH (or designate) of the zone where the case currently resides shall forward the initial *Alberta Hospitalized Influenza and Severe Respiratory Illness (SRI) Report Form* of all confirmed cases to the CMOH (or designate) within two weeks of notification and the final form (amendment) within four weeks of notification.
- For out-of-province and out-of-country reports, the following information should be forwarded to the CMOH (or designate) by FMP:
 - name,
 - date of birth,
 - out-of-province health care number,
 - out-of-province address and phone number,
 - positive laboratory report, and
 - other relevant clinical / epidemiological information.

References

1. Public Health Agency of Canada: Early Detection of Severe Emerging or Re-emerging Respiratory Infections through Severe Respiratory Illness (SRI) surveillance. Latest update: November 17, 2006. www.phac-aspc.gc.ca/eri-ire/pdf/02-SRI-Surveillance-Protocol_e.pdf