

November 14, 2006

Dear State Collaborators:

Coordinating public health surveillance and laboratory testing is critical for infectious diseases control. Emory University, together with the Council of State and Territorial Epidemiologists (CSTE) and the Centers for Disease Control and Prevention, is conducting an assessment of state and large city/county epidemiology programs on the completeness of surveillance data for two notifiable diseases, meningococcal disease and West Nile virus (WNV). A parallel assessment is being conducted among states' public health laboratories via the Association of Public Health Laboratories. Data obtained from these assessments will be compared with national surveillance data to identify correlates of surveillance completeness. Through this study, we will also highlight system and process challenges facing surveillance and laboratory programs.

Meningococcal disease and WNV were selected as diseases to be studied because surveillance and laboratory testing are integrated for control of both diseases. With licensure of a conjugate vaccine covering four of five common *N. meningitidis* serogroups, serogroup-specific surveillance provides vital data for determining appropriate disease control interventions and for monitoring the distribution of serogroups causing disease (www.cste.org/ps/2004pdf/04-ID-08-final.pdf). A CSTE position statement on West Nile fever made the disease nationally notifiable (www.cste.org/ps/2004pdf/04-ID-01-final.pdf).

In order to assess meningococcal disease serogrouping, we will send you a survey consisting of 15 questions, which we estimate will take approximately 20 minutes to complete. We will contact you by e-mail with the link to this assessment. Thank you in advance for either completing the assessment or forwarding the correspondence to a designee in your program with knowledge of meningococcal disease serogrouping.

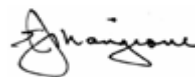
Through a data sharing agreement, we have established three safeguards to ensure appropriate use of project data. First, the project will not directly or indirectly identify state or local public health jurisdictions. Second, preliminary reports will be shared with CSTE leadership prior to distribution or publication. Third, data shared by states will not be used beyond this direct application without prior permission. This project was approved by the Institutional Review Board at Emory University. Participation in this research is voluntary. For WNV, we will separately contact states' Arboviral Surveillance Coordinators later this month to supplement data collected for the 2004 CSTE report on WNV Surveillance Capacity.

Thank you in advance for your time and consideration. The success of our project depends on the generous participation of collaborators like you. If you have questions at any point, please contact Benjamin Silk at bsilk@sph.emory.edu.

Sincerely,



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