



SEP 3 2004

Patrick J. McConnon, M.P.H.
Executive Director
Council of State and Territorial Epidemiologists
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RECEIVED SEP 8 2004

Dear Mr. McConnon:

This is in response to your letter to Dr. James Hughes regarding the Council of State and Territorial Epidemiologists' (CSTE) position statement entitled "Revision of the CSTE case definition for Severe Acute Respiratory Syndrome (SARS)." The revisions substantially improve and clarify the surveillance criteria and reporting requirements outlined in the original case definition. Staff from the Centers for Disease Control and Prevention (CDC) worked closely with CSTE representatives in developing and revising the SARS case definition and found the collaboration to be most timely, cordial, and fruitful. Following are a few points to be noted:

- (1) The new surveillance case definition for SARS, with a hierarchy of four specific categories of SARS reports under investigation (SARS RUI 1-4), will meet a variety of reporting needs in different epidemiologic situations, ranging from surveillance to detect the re-emergence of SARS to reporting established SARS activity in the community. The categories of SARS RUI 1-4 are easier to conceptualize and will likely facilitate identification and reporting of SARS cases.
- (2) As part of SARS preparedness activities, CDC has worked closely with CSTE and other public health partners to establish a secure Web-based data entry system for SARS and establish an XML schema that states can use to transmit information on SARS cases using the CDC secure data network. Both these systems are compliant with the PHIN architecture and will greatly improve the reporting of SARS cases.
- (3) Diagnostic tests for detection of SARS-associated coronavirus (SARS-CoV) infection have now been deployed to laboratories in state public health departments and the Laboratory Response Network. The availability of these diagnostics at the local level will allow more rapid laboratory evaluation of suspect SARS cases.

As noted in the CSTE position statement, further revisions to the surveillance case definition may be required as knowledge of SARS increases and diagnostic technology improves. CDC looks forward to future collaborations with CSTE on any revisions needed for the SARS case definition.

Sincerely,


Julie Louise Gerberding, M.D., M.P.H.
Director