The [appropriate job role – CD nurse, clerk, Epi, etc.] is reviewing MDSS entries and comes across a Legionella case for a 74yo female resident who began experiencing respiratory symptoms four days prior to being admitted to [local hospital name]. The patient was diagnosed with pneumonia and a urinary antigen test was positive for legionella. Antibiotics were initiated and symptoms improved. The patient was discharged to finish recovery at home. The [appropriate job role – CD nurse, clerk, Epi, etc.] initiated a call to the patient and was able to collect information to complete a case investigation. The patient reported a recent knee surgery due to a fall at home. Patient history included multiple visits to healthcare facilities for various follow-up appointments, including a stay at [name and location of local rehab facility] for rehab. Other high-risk activities included visits to a car wash, a hotel out of state, and [local mall name] in the days leading up to her illness onset.

A few days after the initial case was interviewed, a second Livingston case of Legionnaires appears in the MDSS queue. The [appropriate job role – CD nurse, clerk, Epi, etc.] reaches out and determines that this second case involves a 48yo male who recently traveled abroad prior to extensive back surgery two weeks ago. Surgery took place out of county, but rehab took place locally. The case also reported visits to car washes, an outdoor waterpark, and a local hotel stay.

Within a few days, four additional [county name] legionnaires cases are entered into the queue. Upon expanding the search to include surrounding counties, five additional cases are identified in [neighboring county] and [neighboring county] with similar onset dates. All six [your county name] cases show a link between rehab stays at [name of local rehab facility] and reported use of the water therapy room and Whirlpool tubs. In coordination with [neighboring county] and [neighboring county] Health Departments, it is confirmed that their five cases also recently rehabbed at [name of local rehab facility] bringing the total number of associated cases to 11.

**Objectives and Tasks**

1. Ensure participating staff understand the role they might fill during this type of response as well as the role/responsibilities of [agency name] as we fit into the “bigger picture” of the response.
2. Identify if there is a need for [enter name of your public health EOC/command center: ex., PHECC, EOC, etc.] activation. Determine thresholds that would warrant [enter name of your public health EOC/command center: ex., PHECC, EOC, etc.] activation (partial or full) and identify possible triggers for changes in activation (ex., scaling up or down).
3. Understand the process for activating the [enter name of your public health EOC/command center: ex., PHECC, EOC, etc.] and the steps taken for notification, alerting key partners, initial meeting, etc.
4. Identify pre-event incident action planning items (i.e., things we need to accomplish or develop now prior to this type of incident occurring – materials for the [enter name of your public health EOC/command center: ex., PHECC, EOC, etc.] activation process, templates, etc.).
5. Identify potential communication and/or print/digital materials needs.
6. Identify who is at highest risk for this type of incident. What additional needs should we consider for our Access and Functional Needs population?

**Intended Audience**

Health Officer, Medical Director, EH Director, PPHS Director, Nursing Supervisor, EPC, Health Promotions Coordinator, EH Program Coordinator, EH Specialist

**Possible Reference Materials**

* Emergency Response Activation Checklist – If you use this during the drill, “Save As” under your own file/title.
* [CDC Legionella Page](https://www.cdc.gov/legionella/index.html)
* [MDHHS A-Z Page](https://www.michigan.gov/mdhhs/keep-mi-healthy/communicablediseases/recentupdates/diseaselisting) – Page 15
* [MDHHS Surveillance and Investigation Protocol for Legionellosis](https://www.michigan.gov/-/media/Project/Websites/mdhhs/Folder3/Folder98/Folder2/Folder198/Folder1/Folder298/LegionellosisSurveillance_InvestigationProtocol_July_2019.pdf?rev=9fd11f5f68904fe58619c6af0a633630)
* LCHD CD Manual – [S:\PPHS\CD\CD Manual\Reportable Conditions\Legionellosis](file:///S%3A%5CPPHS%5CCD%5CCD%20Manual%5CReportable%20Conditions%5CLegionellosis)