Data are provisional and subject to change

RSV season information
Respiratory syncytial virus (RSV) is a common respiratory virus that usually causes mild, cold-like symptoms. Young children and older adults, especially those with certain underlying health conditions, are at higher risk for severe illness from RSV.

Individual cases of RSV are not reportable in Florida. All outbreaks of RSV are reportable. The Florida Department of Health will continue to make updates on the trends presented in this report as needed.

Season
Florida’s RSV season is longer than the rest of the nation and has distinct regional patterns. For this reason, the state is broken up into five RSV regions, each with their own RSV season. The Florida Department of Health established regional RSV seasons based on activity thresholds provided by the Centers for Disease Control and Prevention.

Florida RSV Regions
- Northwest: October–April
- North: September–March
- Central: August–March
- Southeast: January–December
- Southwest: September–April

Surveillance and investigation
Surveillance is conducted to support clinical decision-making for prophylaxis of premature infants. The determination of unique seasonal and geographic trends in RSV activity in Florida has important implications for prescribing patterns for initiating prophylaxis to children at high risk for complications from RSV infection. The American Academy of Pediatrics currently recommends pre-approval for prophylactic treatment be made based on state surveillance data.

<table>
<thead>
<tr>
<th>County RSV activity trend</th>
<th>Counties currently in season</th>
</tr>
</thead>
</table>

*No counties with outbreaks in current week
**Respiratory syncytial virus (RSV) surveillance**

Figures below show RSV visit data from emergency departments (EDs) participating in ESSENCE-FL statewide for the current year and the previous 3 years. Timeseries begin on MMWR Week 40 to align with Florida’s Flu Review report.

**Figure 1:** Percent of ED visits with discharge diagnoses of RSV increased from previous 3-week average

**Figure 2:** Percent of patients <5 years with discharge diagnoses of RSV decreased from previous 3-week average

**Figure 3:** Percent of patients <5 years admitted with RSV decreased from previous 3-week average

Data source: ESSENCE-FL
**Respiratory syncytial virus (RSV) surveillance**

**Figure 4:** Number of specimens tested and percent positive for RSV for the current RSV year

The most recent weeks may be incomplete since data are aggregated by the earliest date associated with the lab result.

**Figure 5:** Number of specimens tested and percent positive for children <5 years for current year

**Figure 6:** Admissions with RSV per 100,000 population for children <5 years for current and previous 3 years

**Figure 7:** Deaths per 100,000 population for children <5 years for current and previous 3 years

Data source: Merlin lab data

Data source: ESSENCE-FL

Data source: Vital Statistics
Respiratory syncytial virus (RSV) outbreak surveillance

The COVID-19 pandemic has impacted trends in RSV activity, including the number of outbreaks. We saw an unseasonably high number of RSV outbreaks during the summer of 2021. Outbreak numbers during the 2021-22 season returned to a more typical trend.

**Figure 8:** RSV outbreaks during the current RSV year and previous 3 years

![Graph showing RSV outbreaks by week and facility's primary age group served from 2019-20 to 2022-23.]

There have been a total of 28 outbreaks of RSV in the current year with 0 new outbreaks in the current week.

- **Northwest:** 2 outbreaks
- **North:** 6 outbreaks
- **Central:** 9 outbreaks
- **Southeast:** 6 outbreaks
- **Southwest:** 5 outbreaks

No counties with outbreaks in current week.

**Figure 9:** There have been a total of 28 outbreaks of RSV in the current year with 0 new outbreaks in the current week

**Figure 10:** Number of RSV outbreaks by facility's primary age group served for the current RSV year

- **Children:**
- **Older adults:**
- **Other:**

![Bar chart showing number of RSV outbreaks by facility's primary age group served from 10/2/22 to 9/17/23.]

Data source: Merlin outbreak data

Data source: Merlin

Powered by Bing, Microsoft, TomTom
Regional respiratory syncytial virus (RSV) activity <5 years

Figures below show the percent of emergency department (ED) visits with a discharge diagnosis of RSV for facilities participating in ESSENCE-FL by region for the current RSV year and the previous 3-year average.

**Figure 11:** ED visits in the northwest region increased

**Figure 12:** ED visits in the north region increased

**Figure 13:** ED visits in the central region increased

**Figure 14:** ED visits in the southeast region increased

**Figure 15:** ED visits in southwest region increased

**Figure 16:** Facilities reporting data to ESSENCE-FL

Data source: ESSENCE-FL
The following criteria are used to assess trend for RSV emergency department visits and lab positivity.

**Increasing:** current week is >0.001 higher than the previous 3-week average (i.e., 0.1%)

**Decreasing:** current week is >0.001 lower than the previous 3-week average

**No change:** current week is within +/-0.001 of the previous 3-week average


**RSV activity trends**

**Epidemiological linkage:** individuals were present in the setting during the same time period (e.g., same classroom) and there is not a more likely source of exposure for identified cases (e.g., same household).

**Facilities serving adults ≥65 years** (long-term care facilities, assisted living facilities, and nursing homes): ≥2 ill individuals with symptoms within 72 hours, where ≥1 individual tests positive for RSV.

**Facilities serving children** (primary/secondary schools and daycares): ≥3 ill individuals with symptoms within 72 hours who are epidemiologically linked (see below for definition), where ≥1 individual tests positive for RSV.

**Other settings:** ≥2 ill individuals with symptoms within 72 hours, where ≥1 individual tests positive for RSV.

Household clusters are not counted as outbreaks.

**Epidemiological linkage:** individuals were present in the setting during the same time period (e.g., same classroom) and there is not a more likely source of exposure for identified cases (e.g., same household).

**Vital Statistics death certificate**


**RSV activity trends**

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