



# OHIO DEPARTMENT OF HEALTH

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[www.odh.ohio.gov](http://www.odh.ohio.gov)

John R. Kasich/Governor

Lance Himes/Director of Health

October 19, 2018

Dear Provider,

Acute flaccid myelitis (AFM) is an illness characterized by acute onset of flaccid limb weakness and magnetic resonance imaging (MRI) showing lesions in the gray matter of the spinal cord. AFM has been under investigation by health departments and the Centers for Disease Control and Prevention (CDC) for the past 4 years. Surveillance has shown us that AFM cases generally peak in the months of September and October. A biennial pattern has been observed, with the majority of cases reported in 2014 and 2016, and smaller numbers reported in 2015 and 2017. If this pattern continues, we should expect to see an increase in AFM cases in 2018. We are sending this letter to encourage you to be aware of the symptoms of AFM, and to provide some resources to help with the identification and reporting of suspected AFM cases and specimen collection.

AFM appears to start with a prodromal respiratory or gastrointestinal illness about 1 week before limb weakness onset. Pain in the neck or back often directly precedes weakness in one or more limbs, and cranial nerve findings such as slurred speech, difficulty swallowing, and eyelid or facial droop may occur. On exam, the weak limb(s) displays poor tone and diminished reflexes. Cerebrospinal fluid may show a lymphocytic pleocytosis and elevated protein. MRI findings in AFM cases include lesions in the central, or gray matter, of the spinal cord.

Since AFM is a relatively new condition, we need information on all patients to help us better understand the spectrum of illness, and all possible causes, risk factors, and outcomes for AFM. We ask you to send all information about patients that meet the clinical criterion for AFM (sudden onset of flaccid limb weakness) to your health department. **Information should be sent on patients who meet the clinical criterion regardless of any laboratory results or MRI findings.** Note there is no age restriction for reporting suspected cases. The case definition includes people of all ages to allow us to collect information on the full spectrum of the condition in both children and adults. For more information about the case definition for AFM, please see <https://www.cdc.gov/acute-flaccid-myelitis/hcp/case-definition.html>.

Please find enclosed in this packet some Frequently Asked Questions (FAQs) about AFM and sample collection and shipping. We also included a clinician “job aid” to walk you through the process of reporting a suspected AFM patient and sample collection, storage, and shipping.

For questions, you may call your local health department or the Ohio Department of Health (ODH) at 614-995-5599. You may also email the CDC AFM team at [limbweakness@cdc.gov](mailto:limbweakness@cdc.gov).

To notify us of any patients who you are evaluating for acute onset of flaccid limb weakness, please call your local health department or ODH at 614-995-5599.

Link to locate your Local Health Department:

<https://odhgateway.odh.ohio.gov/lhdinformationsystem/Directory/GetMyLHD>

Thank you very much,

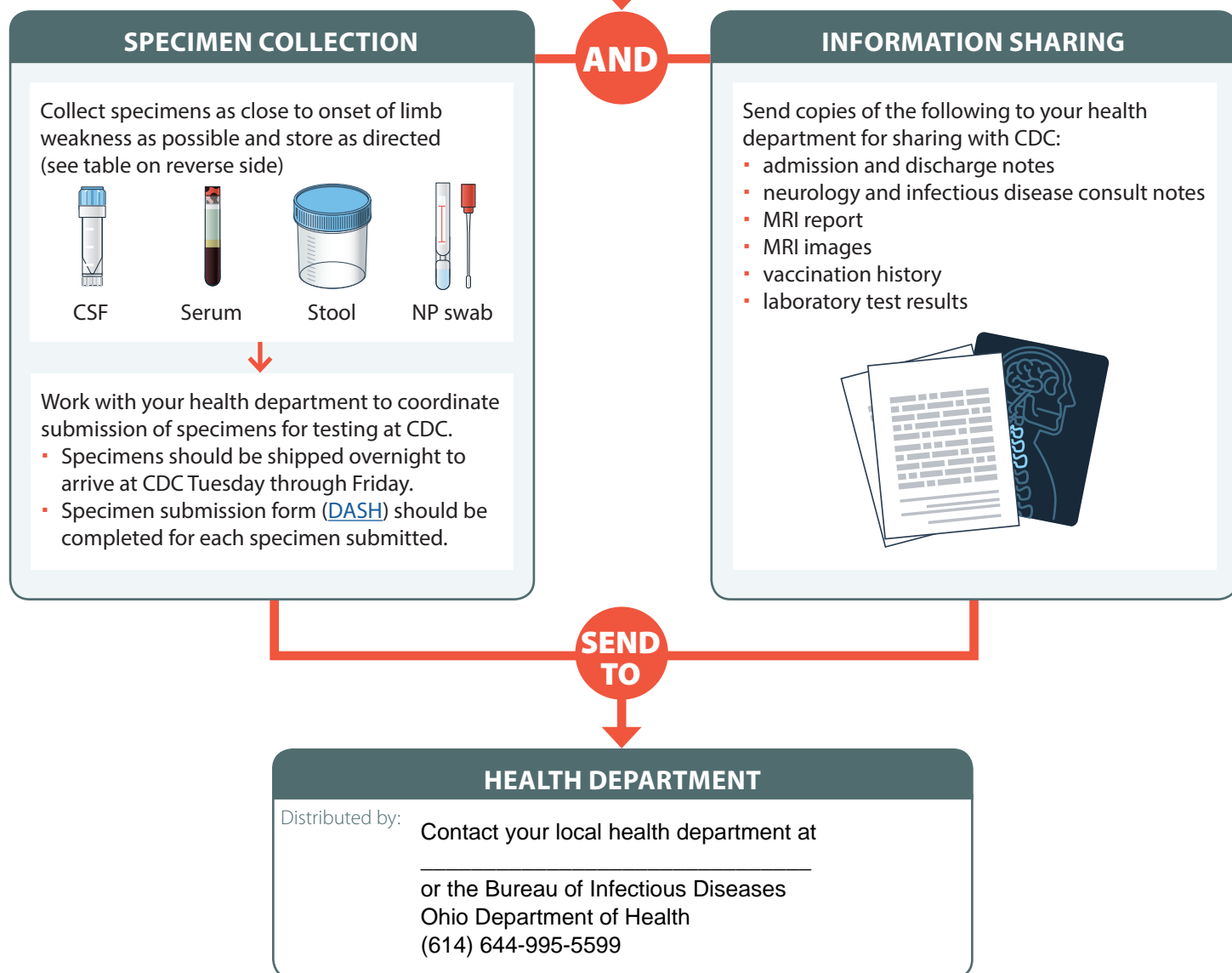
Bureau of Infectious Diseases  
Ohio Department of Health

# Job Aid for Clinicians

How to send information about a suspected AFM case to the health department

**1 Identify suspected case of AFM: patient with onset of acute flaccid limb weakness**


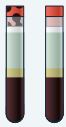

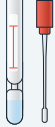
**2 Contact your health department when you identify a suspected case of AFM.**



**3 Health department completes [AFM Patient Summary Form](#), compiles medical records, and sends information to CDC. Patient will be classified by national AFM experts.**

**4 After expert review, patient classification is given back to health department and relayed to clinician by health department.**

### Specimens to collect and send to CDC for testing for suspected AFM cases

SAMPLE	AMOUNT	TUBE TYPE	PROCESSING	STORAGE	SHIPPING
CSF	1mL (collect at same time or within 24hrs of serum)	Cryovial 	Spun and CSF removed to cryovial	Freeze at -20°C	Ship on dry ice
Serum	≥0.4mL (collect at same time or within 24 hours of CSF)	Tiger/red top 	Spun and serum removed to tiger/red top.	Freeze at -20°C	Ship on dry ice
Stool	≥1 gram (2 samples collected 24hrs apart)	Sterile container 	n/a	Freeze at -20°C	Ship on dry ice. Rectal swabs should not be sent in place of stool.
Respiratory (NP)/ Oropharyngeal (OP) swab	1ml (minimum amount)	n/a 	Store in viral transport medium	Freeze at -20°C	Ship on dry ice

**Coordinate with your health department to send information about suspected AFM cases and ship specimens to CDC.**

[www.cdc.gov/acute-flaccid-myelitis](http://www.cdc.gov/acute-flaccid-myelitis)

This job aid was developed by the U.S. Centers for Disease Control and Prevention (CDC).

Distributed by:

Bureau of Infectious Diseases  
Ohio Department of Health  
(614) 995-5599