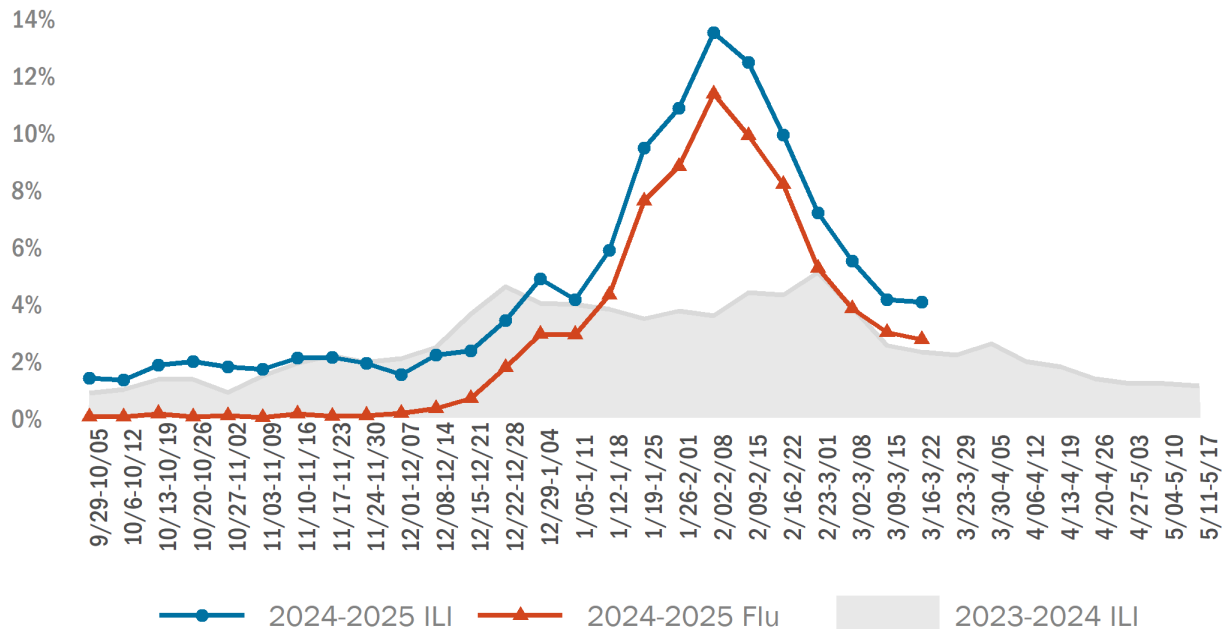


Timeframe: 03/16/2025 - 03/22/2025

- Vermont is working with CDC to refine the state Influenza-like Illness (ILI) Activity Level used in weekly reporting. This information will be updated as it becomes available.
- Current Vermont ILI activity is **elevated but decreasing**, with fewer visits for ILI activity each week for six consecutive weeks.
- COVID-19 and other respiratory illnesses are also being spread during this flu season. Vaccination and respiratory illness prevention strategies are recommended. Visit healthvermont.gov/StayHealthy for respiratory virus prevention and treatment information.
- Visit CDC's [Respiratory Illnesses Data Channel](#) for a summary of national key respiratory illness findings including data stories for activity levels, illness severity, and more.

Syndromic Surveillance

% of Vermont Emergency Room and Urgent Care Visits Due to Influenza-like Illness (ILI) or Diagnosed Influenza (Flu)



During week 12, about 2.75% of Vermont emergency room and urgent care visits were due to diagnosed influenza (red). Approximately 4.1% of Vermont emergency room and urgent care visits were due to ILI (blue), a much higher percentage compared to the percentage of ILI visits in the previous surveillance season (grey).

Illness Definitions

Influenza-like Illness (ILI): determined using the patient’s chief complaint and/or discharge diagnosis. ILI is the presence of a fever equal to or exceeding 100 °F with the addition of cough or sore throat. As of 2021, the ILI definition no longer excludes patients with another diagnosed non-influenza illness.

Influenza (Flu): determined by the patient’s chief complaint of a fever with the addition of cough or sore throat and a discharge diagnosis of influenza.

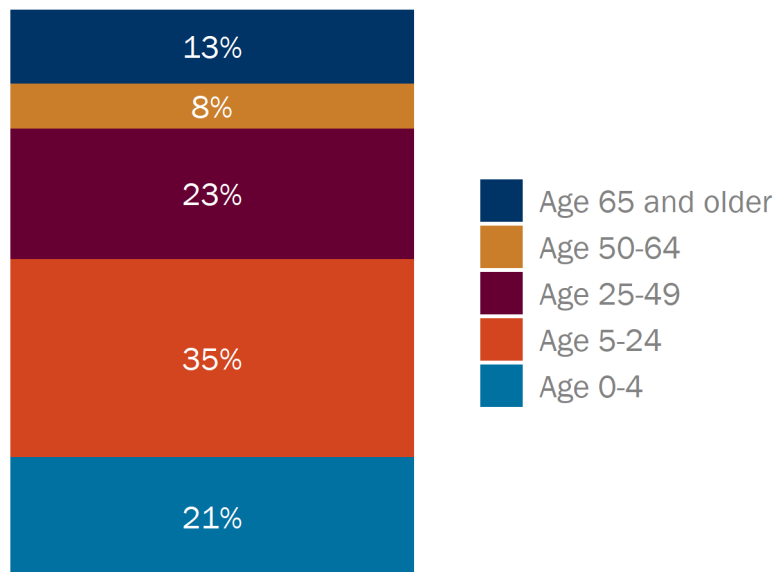
ILINet Sentinel Provider Data

This surveillance data is based upon reports submitted by ILINet, a nationwide group of medical offices that act as influenza sentinels. Sentinel providers report the number of patients with an influenza-like illness (ILI) seen by their practices each week.

Age Distribution of Patients with an Influenza-like Illness

2.16% of visits were due to influenza-like illness (ILI) among Vermont ILINet providers reporting this week compared to 2.33% the previous week.

ILI visits may not be related to diagnosed influenza illness but do involve symptoms of fever and cough or sore throat.



Laboratory Data

The National Respiratory and Enteric Virus Surveillance System (NREVSS) collects data on the number of PCR flu tests performed by participating Vermont labs and how many were positive. This helps determine flu activity in the community.

9.47% of flu PCR tests run this week were positive compared to 14.78% the previous week. Of the total tests this week, about 6.8% were flu A positive and about 2.66% were flu B positive. During the 2024-25 season, about 17.3% of flu PCR tests reported through NREVSS have been positive.

Flu Surveillance Report

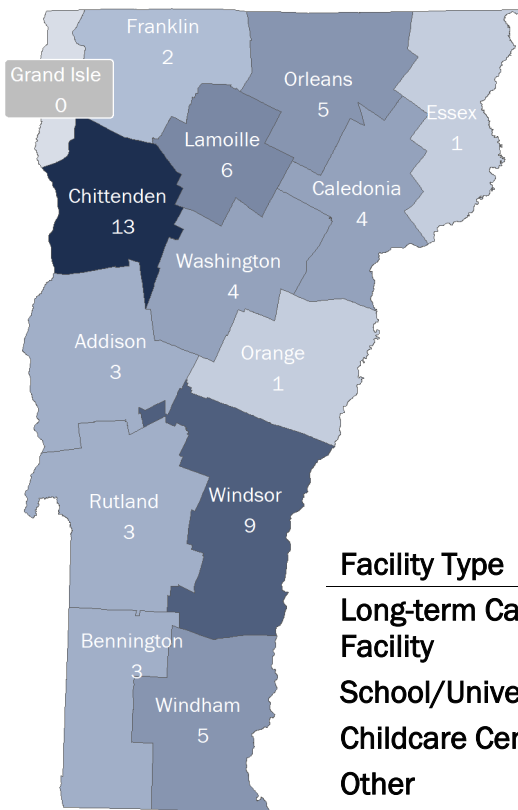
The **Health Department Lab** performs surveillance subtype testing to determine the type of flu, for example H3, H1N1, etc. This information helps determine the circulating virus strains, not the spread of flu virus. These results are reported by subtype testing date.

Type and Subtype	This week: 03/16/2025-03/22/2025	Season so far: 09/29/2024-03/22/2025
Flu A H1pdm09	17	317
Flu A H1pdm09/Flu A H3 co-infection	0	0
Flu A H3	7	181
Flu B Victoria	1	22

Reported Outbreaks

Institutional outbreaks of flu or influenza-like illness (excluding respiratory illnesses not caused by influenza viruses, e.g., COVID-19) are reportable to the Health Department.

Number of Influenza-like Illness and Influenza Lab Confirmed Outbreaks, 09/29/2024-03/22/2025



Facility Type	# Outbreaks Reported	Full Season
	03/16/2025-03/22/2025	09/29/2024-03/22/2025
Long-term Care Facility	0	23
School/University	1	24
Childcare Center	0	2
Other	0	10

For more information: AHS.VDHEpiFluSurv@vermont.gov