



# Monthly Communicable Disease Report Summit County March, 2026



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## Communicable Disease Investigations (Minus Tuberculosis)

- 120 communicable disease investigations were completed.
  - Note: After an investigation has been completed, some reported cases are determined to not be a case. Therefore, the number of cases investigated may not equal the number of reportable conditions in the table below.
  - Disease investigations included 21 cases of CPO-Enterobacter, 13 cases of CPO-Acinetobacter, 12 cases of Hepatitis B (Chronic), 11 cases of *Streptococcus pneumoniae*, 10 cases of CPO-Pseudomonas, 9 cases of Strep Group A, 7 cases of Lyme disease, 6 cases of Varicella, 5 cases of *C. auris* colonization screening, 5 cases of Salmonella, 3 cases of *C. auris*, 3 cases of Campylobacter, 3 cases of Legionella, 2 cases of CPO-Acinetobacter colonization screening, and 2 cases of Giardiasis. Additionally, there was one case each of the following: Creutzfeldt-Jakob disease, Cryptosporidiosis, *E. coli*, *Haemophilus influenzae*, Hepatitis A, Listeriosis, Pertussis, and Yersiniosis.

## Tuberculosis

- 1 new confirmed case of TB reported.
- 4 cases are being provided Direct Observed Therapy.
- 4 total TB cases currently being followed.
- Contact tracing of these new TB cases yielded 9 new contacts.

## Outbreaks

- 3 new Outbreaks were identified.
- The cause of these outbreaks included: COVID-19, Strep, and Legionella.
- The location type of outbreaks included: Long Term Care Facility, School, Healthcare Facility

## Epicenter

- Epicenter is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local emergency departments.
- 5 Epicenter alerts were issued this month
  - Reasons for these alerts included: 2 Headache, 1 Fever, 1 Stiff Neck and 1 Suspected Drug Overdose.

## Influenza Surveillance

Surveillance for the 2025-2026 flu season is ongoing. Reports from previous influenza seasons are available on the SCPH website: <https://www.scph.org/flu-surveillance-reports>

## Vector-borne Surveillance

Copies of the reports for 2025 and previous years may be accessed at: <https://www.scph.org/vector-surveillance-reports>

## Communicable Disease Reports Received, March 2026

Reportable Condition	March 2026	February 2026	Year-to- Date 2026	Year-to- Date 2025
Amebiasis	0	0	0	4
Anaplasmosis-Anaplasma phagocytophilum	0	0	0	0
Babesiosis	0	0	0	0
Botulism - infant	0	0	0	0
Botulism, food borne	0	0	0	0
Brucellosis	0	0	0	0
C. auris	2	1	6	3
C. auris - Colonization Screening	4	1	12	11
Campylobacteriosis	3	7	22	20
Chikungunya virus	0	0	0	0
Chlamydia infection	191	162	535	535
Cholera	0	0	0	0
Coccidioidomycosis	0	0	0	1
COVID-19**	0	0	0	1985
CPO	18	8	38	31
CPO - Colonization Screening	2	1	4	10
Creutzfeld-Jakob Disease	0	0	0	0
Cryptosporidiosis	1	0	3	3
Cyclosporiasis	0	0	1	0
Dengue	0	0	0	0
Diphtheria	0	0	0	0
E. coli, Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype)	0	0	3	6
Ehrlichiosis-Ehrlichia chaffeensis	0	0	0	0
Giardiasis	2	3	5	24
Gonococcal infection	84	70	233	174
Haemophilus influenzae (invasive disease)	1	0	3	6
Hantavirus infection	0	0	0	0
Hemolytic uremic syndrome (HUS)	0	0	1	0
Hepatitis A	1	0	1	1
Hepatitis B - Perinatal Infection	0	1	1	1
Hepatitis B (including delta) - acute	0	1	1	0
Hepatitis B (including delta) - chronic	4	4	15	36
Hepatitis C - acute	0	0	1	1
Hepatitis C - chronic	23	30	74	58
Hepatitis C - Perinatal Infection	0	0	0	1
Hepatitis E	0	0	0	0
HIV/AIDS	4	3	12	11
Influenza - ODH Lab Results	4	2	10	8
Influenza-associated hospitalization	33	71	194	518
Influenza-associated pediatric mortality	0	0	0	0
LaCrosse virus disease	0	0	0	0
Legionellosis	2	3	7	4
Listeriosis	1	0	1	0
Lyme Disease	7	1	15	6
MIS-C associated with COVID-19	0	0	0	0

## Communicable Disease Reports Received, March 2026

Reportable Condition	March 2026	February 2026	Year-to- Date 2026	Year-to- Date 2025
Malaria	0	0	1	1
MERS	0	0	0	0
Measles	0	0	0	0
Meningitis - aseptic/viral	0	0	0	1
Meningitis - bacterial (Not N. meningitidis)	0	1	1	1
Meningococcal disease - Neisseria meningitidis (call health department immediately)	0	0	0	0
Mpox	0	0	0	0
Mumps	0	0	0	0
Pertussis	1	0	1	8
Powassan virus disease	0	0	0	0
Psittacosis	0	0	0	0
Q fever, acute	0	0	0	0
Rubella	0	0	0	0
Salmonella Paratyphi infection	0	0	0	0
Salmonella typhi	0	0	0	0
Salmonellosis	5	4	18	21
Shigellosis	0	1	4	0
Spotted fever rickettsiosis, including RMSF	0	0	0	0
Staphylococcal aureus - intermediate resistance to vancomycin (VISA)	0	0	0	0
Streptococcal - Group A -invasive	10	5	20	12
Streptococcal - Group B - in newborn	0	0	0	2
Streptococcal toxic shock syndrome (STSS)	0	1	1	0
Streptococcus pneumoniae - invasive antibiotic resistance unknown or non-resistant	6	10	22	21
Streptococcus pneumoniae - invasive antibiotic resistant/intermediate	4	3	11	7
Syphilis - all stages	11	12	37	56
Syphilis - Congenital	0	0	2	1
Tetanus	0	0	0	0
Toxic Shock Syndrome (TSS)	0	0	0	0
Trichinellosis	0	0	0	0
Tuberculosis	1	1	2	0
Tularemia	0	0	0	0
Typhoid fever	0	0	0	0
Varicella	0	0	0	3
Vibriosis (not cholera)	0	0	0	0
West Nile virus disease (also current infection)	0	0	0	0
Yersiniosis	0	2	4	5
Zika virus infection	0	0	0	0
<b>Total</b>	<b>425</b>	<b>409</b>	<b>1,322</b>	<b>3,597</b>

\*\*As of 10/1/2025, COVID-19 is no longer a Class B reportable disease in Ohio.

**Notes:**

1) This report includes the number of reports of disease received and investigated by Summit County Public Health (SCPH). **This includes all reports that were determined to be probable, suspected, or confirmed.** Based on case investigation, clinical diagnoses, IDCM case definitions, and lab results, the case status may change. NR = not reported in previous year.

2) The Total Year-to-Date column reflects all cases of disease where SCPH is identified as the local health department in the Ohio Disease Reporting System (ODRS) as of the date that data was extracted. This includes the cases of disease entered into ODRS after last month's report was generated which will now be included in the Previous Month Revised column. Data may also vary in response to recent changes in data extraction and analysis. **Because case classifications can change over time, monthly figures should not be considered final until the annual report is complete.**

3) The number of perinatal hepatitis B cases reflect the number of infants born to hepatitis B positive mothers during the reporting period. These infants will be followed by the Perinatal Hepatitis B Prevention Program (PHBPP) until serology indicates that the child has immunity.

*For questions or comments about this report, please contact the Communicable Disease Unit at (330) 375-2662. This report was issued on April 3, 2026.*