

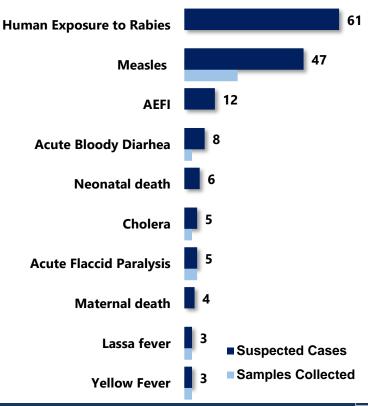
Liberia IDSR Epidemiology Bulletin

Epi-week 21 (May 20-26, 2024)

Country Population: 5,104,413 | Volume 20 Issue 20 | May 20-26, 2024 | Data Source: CSOs from 15 Counties and Laboratory

Highlights

Figure 1: Public Health Events Reported



Keynotes and Events of Public Health Significance

- A total of 154 events of public health importance including 10 deaths reported
- Completeness and timeliness of health facility reports were both 98%
- Ongoing Lassa fever outbreak in four Counties
- Ongoing Measles outbreak in seven Counties
- ◆ Ongoing Mpox outbreak in Grand Kru County

Reporting Coverage

Table 1: Health Facility Weekly IDSR Reporting Coverage, Liberia, Epi-week 21, 2024

Country	Expected Reports from HF*	Reports Received	Received on Time	Completeness	Timeliness
County				(%)	(%)
Bomi	29	29	29	100	100
Bong	66	65	65	98	98
Gbarpolu	18	18	18	100	100
Grand Bassa	38	38	38	100	100
Grand Cape Mount	36	36	36	100	100
Grand Gedeh	25	25	25	100	100
Grand Kru	25	25	25	100	100
Lofa	60	60	60	100	100
Margibi	62	62	62	100	100
Maryland	27	27	27	100	100
Montserrado	391	385	385	100	100
Nimba	102	102	102	98	98
Rivercess	21	21	21	100	100
River Gee	21	21	21	100	100
Sinoe	41	41	41	100	88
Liberia	962	955	955	98	98

• The national target for weekly IDSR reporting is 80%. Health facility timeliness is monitored at the health district level

Legend: ≥80 <80

955 (98%)
Health
facilities
reported
IDSR data

98(98%) Health districts reported IDSR data

955 (98%)
Health
facilities
reported
timely IDSR

Vaccine-Preventable Diseases

Measles

- Forty-seven (47) suspected cases were reported (see table below)
 - o Twenty-one (21) specimens were collected 15 tested negative, 1 positive and 4 pending testing
 - The proportion of suspected cases vaccinated (29/47) 62%
- Cumulatively, one thousand thirty-nine (1029) cases reported
 - o Proportion of suspected cases with sample collected (455/1029) 44%
 - o Proportion of suspected cases with sample tested (367/455) 81% (negative 250, confirmed 117)
 - o Proportion of negative Measles cases tested for Rubella (175/250) 70% (negative 157, confirmed 18)

Table 2: Distribution and Vaccination Status of Measles Cases, Liberia, Epi-week 21, 2024

		Vaccinated	Number of Doses Received		
			One	Two	Doses Not
County	# of cases		Dose	Doses	Indicated
Gbarpolu	2	1	0	0	1
Grand Bassa	3	2	1	0	1
Grand Cape Mount	3	3	3	0	0
Grand Gedeh	1	1	1	0	0
Grand Kru	1	0	0	0	0
Maryland	6	4	4	0	0
Montserrado	2	1	0	1	0
Nimba	23	13	8	4	1
River Gee	4	2	0	0	2
Sinoe	2	2	2	0	0
Total	47	29 (62%)	19	5	5

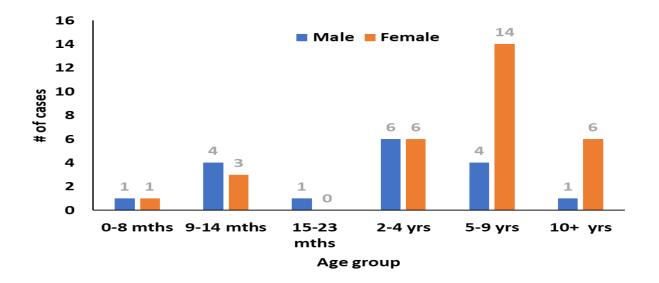


Figure 2: Suspected Measles Cases by Age group and Sex, Liberia Epi week 21, 2024

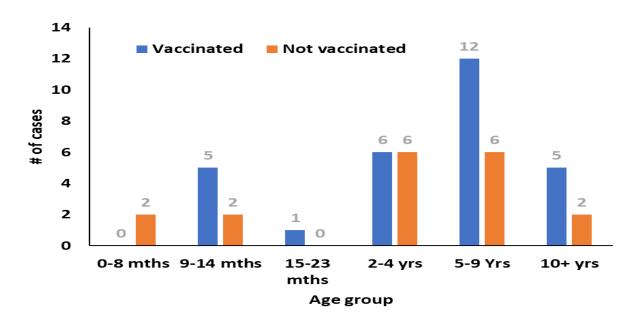


Figure 3: Suspected Measles Cases by Age Group and Vaccination Status, Liberia, Epi-Week 21, 2024

Table 3: Status of Confirmed (lab, clinically confirmed, and epi-linked) Measles Cases by County, Liberia, December 13, 2021- May 26, 2024

COUNTY	CUMULA TIVE SUSPECT ED CASES	VE		ICATIO MED CA	ON OF ASES			TION OF DEATHS	CUMUL ATIVE DEATHS	CF R (%)	# CONFI R MED CASES WEEK	Outbrea k Status	
	CASES		Lab confirm ed	Epi Link e d	Clinically Compati ble	Lab confirm ed	Epi Linke d	Clinically Compati ble			18	K 19	
Montserrado	5, 456	5,373	148	1658	3, 567	3	61	5	69	1.3	0	0	Ended
Nimba	1, 261	1,236	59	259	918	0	1	3	4	0.4	12	17	Ongoing
Margibi	827	803	37	136	630	0	0	1	1	0.1	0	0	Ended
Grand Bassa	962	924	41	212	671	1	0	6	7	0.9	0	0	Ended
Lofa	361	292	35	66	191	0	0	0	0	0	0	3	Ongoing
Bong	603	578	25	21	532	0	1	2	3	0.5	0	0	Ended
Maryland	1291	1281	33	361	887	0	0	0	0	0	12	8	Ongoing
Grand Gedeh	724	574	65	114	395	0	0	0	0	0	2	2	Ongoing
Sinoe	298	243	48	84	111	0	0	0	0	0	2	4	Ongoing
Bomi	183	147	37	27	83	1	2	2	5	3	0	0	Ended
Grd Cape Mt	215	187	23	18	146	0	2	1	3	1.6	0	0	Ended
Grand Kru	1112	1,080	50	190	840	0	0	2	2	0.2	2	7	Ongoing
Gbarpolu	67	46	5	2	39	0	0	0	0	0	0	0	Ended
Rivercess	112	84	26	54	4	0	1	0	1	1.1	0	0	Ended
River Gee	151	118	30	38	50	0	0	0	0	0	2	4	Ongoing
Total	13,623	12,966	662	3,240	9,064	5	68	22	95	7.8	32	45	

Table 4: Status of Confirmed Measles Cases by County, Liberia, December 13, 2021 - May 26, 2024

County	Total Cases	Active	Recovery	Deaths	# of Districts
Montserrado	5,373	0	5,304	69	0/7
Nimba	1,258	14	1,240	4	4/6
Grand Bassa	924	0	917	7	0/8
Margibi	803	0	802	1	0/4
Bong	578	0	575	3	0/9
Maryland	1,287	0	1287	0	3/6
Lofa	292	0	292	0	1/6
Grand Kru	1,085	0	1083	2	3/5
Grand Cape Mount	187	0	184	3	0/5
Bomi	147	0	142	5	0/4
Rivercess	84	0	83	1	0/6
Gbpolu	53	2	51	0	1/5
Grand Gedeh	582	0	582	0	1/6
River Gee	121	3	118	0	1/6
Sinoe	244	1	243	0	2/10
Total	13,018	20	12,903	95	16/98

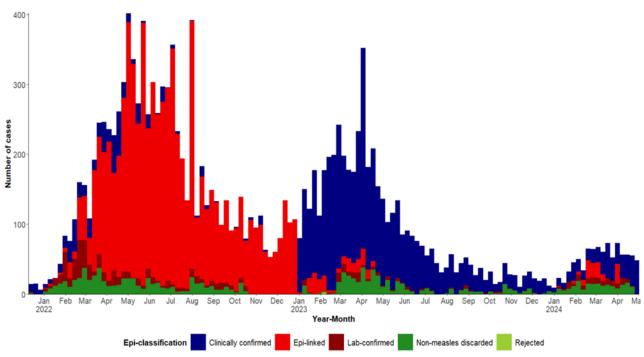


Figure 4: Epi-curve of Measles Cases by Epi-classification, Liberia, 13 December 2021 – 26 May 2024

PUBLIC HEALTH RESPONSE

I. Coordination

• IMS meetings are being held for coordination and mobilization of resources in affected Counties.

II. Epidemiological Surveillance

Active case search ongoing in affected and surrounding communities in Grand Kru County

III. Case management

• Case management ongoing in affected counties

IV. Immunization

- One hundred eighty-four (184) children under 2 years were vaccinated during the response in Grand Kru County
 - o Males 78 (42.4%)
 - o Females 106 (57.6%)

V. Laboratory

• Six hundred six-two (662) cases have been confirmed by the NPHRL from December 13, 2021 – May 26, 2024.

VI. Risk Communication and Community Engagement

 Continual community advocacy meetings with local leaders and family members in the affected communities (Grand Kru)

Challenges

- No specimen collection kit in Lofa County
- Limited supply of essential medications and medical supplies for case management in affected counties

Acute Flaccid Paralysis (AFP)

- Four (4) cases were reported from Montserrado (2), Maryland, and Nimba Counties
 - o All specimens were collected: and shipped
- Cumulatively, forty-six (46) cases have been reported
 - Fourteen (14) tested negative, One (NPENT), 31 pending testing

Neonatal Tetanus

- Zero cases reported
- Cumulatively, twelve (12) cases have been reported including four (4) deaths

Influenza-Like Illnesses

Coronavirus Disease (COVID-19)

- Zero suspected cases reported
- Cumulatively, two (2) cases have been reported

Influenza

- Zero cases reported
- Cumulatively, seventy (70) suspected cases reported
 - Seventy (70) specimens were collected: 65 tested negative, 5 specimens were discarded

Viral Hemorrhagic Fever

Lassa fever

- Three (3) suspected cases were reported from Bong County
 - o All specimens were collected and all tested negative
- Cumulatively, ninety-seven (97) suspected cases have been reported

- o Proportion of suspected cases with the sample collected (97/97) 100%
- o Proportion of suspected cases with sample tested (93/97) 96%
 - o Confirmed 13 including 4 deaths, negative 80, and discarded 4
 - o Case fatality rate: (4/13) 31%

Outbreak: January 6, 2022- May 26, 2024

- No new confirmed case reported
- Twelve (12) contacts under 21 days of follow-up
- Total of 114 contacts including 26 HCWs line-listed
- A total of 151 confirmed cases including 45 deaths reported
- Cumulative Case Fatality Rate (CFR): 30% (45/151)
- Four counties are currently in outbreak

Table 6: Summary of Lassa fever Outbreak, Liberia, January 6, 2022- May 26, 2024

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County	Outbreak Districts	Outbreak Start Date	Total suspected	Total confirmed	HCWs confirmed	Total Deaths	Deaths in HCWs	CFR %	Total Contacts	# HCW contacts	Contacts_ became cases	Contacts under follow up	Contacts completed	Days in countdown	Outbreak Status
	Bushrod	13-Feb-23	17	1	0	0	0	0%	29	21	0	0	29	Completed	Ended
Montserrado Bong	Central Monro	27-Nov-23	1	2	0	1	0	50%	49	0	0	0	49	Completed	Ended
Montserrado	Central Monro	3-Mar-23	38	2	0	1	0	50%	28	27	0	0	28	Completed	Ended
	Bushrod	30-Apr-24	2	1	0	0	0	0%	14	6	0	0	14	8	Countdown
	Suakoko	21-Apr-23	192	54	18	13	2	24%	496	114	6	0	417	Completed	Ended
	Jorquelleh	15-Oct-23	14	6	3	1	1	17%	121	86	3	0	169	Completed	Ended
Bong	Suakoko	23-Feb-24	18	3	0	0	0	0%	29	14	0	0	24	10	Countdown
	Salala	8-Mar-24	2	2	0	1	0	50%	21	0	0	0	21	34	Countdown
	Jorquelleh	11-Apr-24	2	1	0	1	0	0%	22	17	0	0	22	29	Countdown
	District 3 A&B	21-Aug-23	87	44	0	10	0	23%	177	40	40	0	159	Completed	Ended
Grand Bassa	Buchanan	11-Aug-23	2	1	0	1	0	100%	4	2	0	0	4	Completed	Ended
	District 3 A&B	30-Apr-24						33%	12			12		Active	Ongoing
	Saclepea-Mah	21-Nov-23	4	2	0	1	0	50%	5	0	0	0	5	Completed	Ended
Nimba	Sanniquellie- Mah	6-Feb-23	42	15	0	6	0	40%	43	35	8	0	43	Completed	Ended
Nunoa	Tappita	20-Nov-23	12	5	0	3	0	60%	88	39	4	0	77	Completed	Ended
	Bain-Garr	1-Jun-23	24	6	0	3	0	50%	61	25	0	0	31	Completed	Ended
	Bain-Garr	15-Apr-24	5	2	0	1	0	50%	25	7	0	0	25	7	Countdown
River Gee	Putupo	25-Nov-22	2	1	0	1	0	100%	14	0	0	0	14	Completed	Ended
Total			469	151	21	45	3	30%	1238	436	61	12	1131		

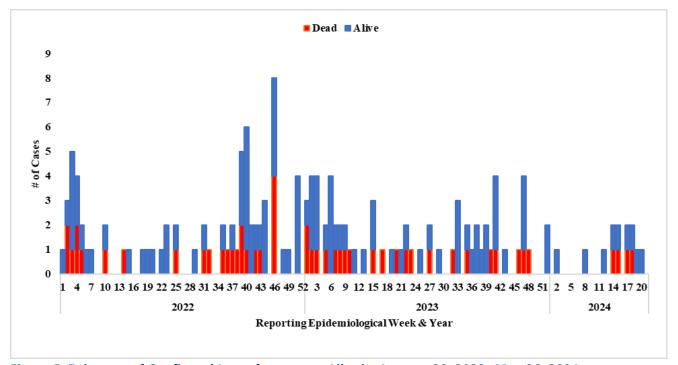


Figure 5: Epi-curve of Confirmed Lassa fever cases, Liberia, January 30, 2022- May 26, 2024

Public Health Measures

I. Coordination

• The National Public Health Institute of Liberia (NPHIL) and the Ministry of Health (MOH) are providing technical support to the surveillance team with support from partners.

II. Surveillance

- o Active case search ongoing in affected communities and districts
- Twelve (12) contacts under 21 days follow up
- Weekly sit-reps developed and disseminated to stakeholders

III. Laboratory

- The National Public Health Reference Laboratory continues testing of Lassa fever samples
- A total of 151 Lassa fever cases have been confirmed since this outbreak

IV. Case management and IPC

- o Ribavirin supply in the country is being distributed for treatment of Lf cases to affected counties
- All cases treated with Ribavirin and discharged
- o There is no case currently in isolation

Challenges

- o Limited supply of IPC materials in affected counties
- Limited logistics (gasoline, communication cards, fuel, etc.) to support active case search and contact tracing in the affected county

Yellow Fever

- Three (3) suspected cases reported from Grand Kru County
- All specimens collected, 2 specimens reached the NRL and 1 in transit
- Cumulatively forty-five (45) cases have been reported
 - Proportion of suspected cases with samples collected (42/45) 93%, however, 6 samples pending testing and
 1 samples to be investigated
 - Proportion of suspected cases with samples tested (34/42) 81% (negative 33) (1 indeterminate)

Dengue

- Zero cases reported
- Cumulatively, three (3) suspected cases were reported

Ebola Virus Disease

Zero cases reported

Diarrheal Diseases

Acute Bloody Diarrhea (Suspected Shigellosis)

- Eight (8) cases were reported from Lofa (2), Gbarpolu (2), Sinoe (2), Margibi (1), and Nimba (1) Counties
- Three specimens were collected and 1 rejected, 2 pending arrival at the lab
- Cumulatively, one hundred ninety-three (193) cases have been reported
 - o 103 specimens were collected, 82 reached the Lab
 - o 77 tested negative, 5 rejected

Severe Acute Watery Diarrhea (Suspected Cholera)

- Five (5) cases were reported from Nimba (2), Grand Gedeh (1), River Gee (1), and Bomi (1) Counties
 - Three specimens were collected and pending testing
- Cumulatively, one hundred thirty-three (133) cases have been reported
 - o 75 specimens collected, 48 reached the Lab
 - o 39 tested negative, 6 rejected, and 3 pending testing

Other Reportable Diseases

Animal bite (Human Exposure to Rabies)

- Firsty-one (61) animal bite cases were reported from Nimba, (12), Montserrado (12), Grand Bassa (9), Maryland (5), Bomi (4), Lofa (3), Rivercess (3), Grand Kru (3), Grand Gedeh (2), Sinoe (2), Margibi (2), Grand Cape Mount (1), Gbarpolu (1), River Gee (1), and Bong (1) Counties
- All bites were attributed to dog
- Proportion of cases investigated: (31/61) 51%
- Proportion of dogs vaccinated: (0/61) 0%
- Cumulatively, 1,319 cases have been reported

Public Health Actions

- PEP Administered to 5 persons (8%): Montserrado (4), and Bong (1) Counties
- *All cases were investigated only by the human health surveillance team

Meningitis

- Zero suspected case reported
- Specimen was collected tested negative
- Cumulatively, sixteen (16) suspected cases have been reported
 - o Proportion of specimen collected (14/16) 88%, 2 specimens not collected
 - o Proportion of specimens tested (13/14) 93% (12 negative, 1 positive) and one did not reach the lab

Mpox

- Zero cases reported
 - Specimen was collected tested negative
- Cumulatively, thirty-nine (39) suspected cases have been reported with 32 samples collected, of which, 5 tested positive, 24 negative, and 1 rejected 2 pending investigation

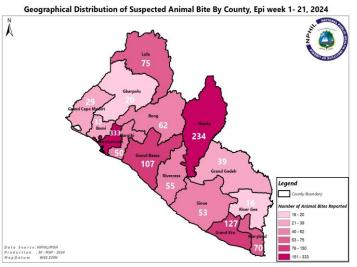
Outbreak

- One new confirmed case reported from Trehn District, Grand Kru County
- A total of 20 contacts have been line-listed and being followed up for 21 days
- Cumulatively 2 cases (1 positive, 1 suspected) have been reported since the beginning of the outbreak

Situational Context of the Index case

On May 6, 2024, a 24-year-old female patient (referred to as HH) from Behwan Community in Trehn Health District, Grand Kru County, visited Behwan Health Center. She complained of headache, fever, lack of appetite, generalized body pain, and a rash that began on May 2, 2024, after returning from the farm. The clinician suspected Monkeypox and promptly informed the District Surveillance Officer (DSO). Simultaneously, a whole blood sample was collected and sent to the National Public Health Reference Laboratory (NPHRL) for investigation. The patient received treatment, including Ceftriaxone (1g intravenously twice a day for 3 days), Erythromycin (500mg orally twice a day for 5 days), Paracetamol (1g orally twice a day for 3 days), and a daily multivitamin for 10 days.

On May 10, 2024, the NPHRL confirmed the positive result. The DSO-led team was dispatched to the patient's community on May 13, 2024, to investigate, identify additional cases, compile a list of potential contacts, and



implement public health control measures (including IPC and risk assessment). As of May 15, 2024, twenty (20) contacts are under monitoring for signs or symptoms of the disease

Public Health Measures

I. Coordination

- The district rapid response team has been activated
- Investigation is currently ongoing in the field
- · Coordination is ongoing at county and district levels
- First county coordination meeting has been scheduled for Friday, May 17, 2024

II. Epi-surveillance

- Contact tracing and line listing are ongoing in the affected community and its surroundings
- Twenty (20) contacts have been line-listed undergoing daily monitoring as of May 14, 2024
- Active case search is ongoing in the affected communities and its surroundings

III. Risk Communication & Community Engagement

- Community engagement meetings with local authorities in the affected communities are ongoing
- Awareness and health education on the spread and prevention of the disease in the affected communities and its surroundings are ongoing

IV. Infection Prevention and Control (IPC)

- Reinforced hand washing in the affected community
- Inventory on IPC materials are being conducted at the various health facility

V. Case Management

- Ensured isolations of suspected, probable, and confirmed cases
- Treatment of confirmed case is in progress

Planned Activities

- Conduct regular radio talk shows to create awareness and health education on the prevention and spread of the disease
- Intensify active case search in the affected communities and their surroundings
- Continue community engagement activities in the affected communities
- Monitor contacts daily for signs and symptoms of Mpox
- Conduct IMS meeting every week

Challenges

- No gasoline support to intensify response activities
- No feeding support for patients at the treatment units
- No internet and communication support for the response team
- No DSA for responders

Unexplained cluster of deaths

Zero cases reported

An Unexplained Cluster of Health Events

Zero cases reported

Other Events of Public Health Importance

Maternal Mortality

- Four (4) deaths were reported from Montserrado County
- Reported causes: PPH (2), 2 pending review
- Reporting sites:
 - o Health facility (4/4) 100%
- Cumulatively, one hundred twenty-two (122) deaths reported
 - o Proportion of deaths reviewed (39/122) 32%

Neonatal Mortality

- Six (6) deaths were reported from Montserrado (3), Bong (2), and Nimba (1) Counties
- Reported causes: Birth Asphyxia (4), Severe Pneumonia (1), and Preterm (1)
- Reported sites:
 - o Health facility (6/6) 100%
- Cumulatively, three hundred seventeen (317) deaths reported
 - o Proportion of deaths reviewed (78/317) 25%

Adverse Events Following Immunization (AEFI)/Adverse Drug Reaction (ADR)

- Twelve (12) cases were reported from Sinoe (5), Maryland (2), River Gee (2), Grand Bassa (1), Montserrado (1), and Gbarpolu (1) Counties
- All reported cases were classified as non-serious
- Related vaccine:
 - o Penta (7/12) 58%
 - Others (5/12) 42%
- Cumulatively, four hundred ninety-one (491) events were reported and all were classified as non-serious.

Neglected Tropical Diseases

YAWS

Zero cases were reported

Buruli Ulcer

Zero cases were reported

Border Surveillance Update

A total of 5851 travelers were recorded for the week with incoming travelers accounting for 56% (3257/5851)

Table 7: Border activity at the PoE for incoming and outgoing travelers, Liberia, Epi week 21

								Travelers	
					Total			Vaccinated	Alerts
		Weekly			traverlers	Yellow	Card	against YF	detected/
Type of Ports	Point of Entry	total	Arrival	Departure	with YB	Book Damage	Replaced	& Issued	Verified
	James S. Paynes	31	16	15	5	0	0	0	0
Airport	Robert Int'l Airport	3919	1874	2045	3774	0	58	8	0
Seaport	Freeport of Monrovia	288	144	144	288	0	0	0	0
Seaport	Buchanan Port	108	54	54	108	0	0	10	0
	Bo Water Side	383	217	166	373	0	0	0	0
Ground	Ganta	79	40	39	52	0	0	0	0
Crossing	Yekepa	43	26	17	23	0	0	0	0
	Loguatuo	1000	886	114	260	0	0	0	0
Total		5,851	3,257	2,594	4,883	0	58	18	0

Note: Yellow book issue for both arrival and departure; Vaccination coverage for both arrival and departure

Public Health Measures

National level

- Providing remote technical and operational support to counties
- Produced and disseminated situation reports (Lassa fever, Measles, and Mpox outbreaks)
- Produced and disseminated weekly bulletin

County-level

Surveillance

- Publication of situational reports
- o Active case search ongoing in affected and surrounding communities

Case Management

- o Administration of PEP
- Management of measles and Lassa fever cases ongoing in affected counties

Appendi	opendix Immary of Immediately Reportable Diseases, Conditions, and Events by County																			
Summar	y of Immediately Reportable	Dis	seas	ses,	Con	diti	ons	, an	d E	ven	ts by	y Co	oun	ty		l				l _
			Bomi	Bong	Gbarpolu	Grand Bassa	Grand Cape Mount	Grand Gedeh	Grand Kru	Lofa	Margibi	Maryland	Montserrado	Nimba	Rivercess	River Gee	Sinoe	Total Weekly	Cumulative Reported	Cumulative Lab-confirmed
No. of Expect	ted Health District		4	9	5	8	5	6	5	6	4	6	7	11	6	6	10	98		
	District Reported		4	9	5	8	5	6	5	6	4	6	7	11	6	6	10	98		
Viral Hemorrhagic Vaccine Preventable Disea	Acute Flaccid Paralysis (Suspected Polio)	A D A	0 0	0 0	0 0 2	0 0 3	0 0 3	0 0 1	0 0 1	0 0	0 0	0 1 6	2 2	0 1 23	0 0	0 0 4	0 0 2	0 4 0	14 0 461	0 0 50
enta	Measles	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
le Prev	Neonatal Tetanus	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0
Vaccin	Yellow fever	A D	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	3	16 0	0
hagic I	Dengue fever	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0
lemorr	Ebola Virus Disease	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Lassa fever	A D	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	42 7	0
ıza-Lik	COVID-19	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
Influer	Influenza Like Illnesses	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	40 0	0
al Dise	Acute Bloody Diarrhoea (Shigellosis)	A D	0	0	2	0	0	0	0	2	1 0	0	0	1	0	0	2	8	88 0	0
Diarrheal Dise Influenza-Lik	Severe Acute Watery Diarrhoea (Cholera)	A D	1	0	0	0	0	1	0	0	0	0	0	2	0	1	0	5	80	0
lth Ii	Maternal Mortality	D	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0	4	56	U
lic Hea	Neonatal Mortality	D	0	2	0	0	0	0	0	0	0	0	3	1	0	0	0	6	132	
of Pub	AEFI	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5 0	12 0	272 0	0
Events of Public Hea	Unexplained Cluster of Health Events/Disease	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Мрох	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	23	2
Disease	Tuberculosis	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	20	0
rtable	Human Exposure to Rabies (Suspected Human	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	636	0
Other Reportable Diseases	Meningitis	D A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8	1
Othe	Unexplained Cluster of deaths	D A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
I pa	Buruli Ulcer	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Neglected Tr	Yaws	D A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Ž	TO'	D TAL	0 1	0 5	0 5	0 4	0 0	0 2	0 0	0 2	0	0 9	0	0 28	0	7	9	0 45	0 1907	7

D = Dead **A** = Alive

Notes

- **Completeness** refers to the proportion of expected weekly IDSR reports received (target: ≥80%)
- Timeliness refers to the proportion of expected weekly IDSR reports received by the next level on time (target: ≥80%). The time requirement for weekly IDSR reports:
 - Health facility required on or before 5:00 pm every Saturday to the district level
 - Health district required on or before 5:00 pm every Sunday to the county level
 - o County required on or before 5:00 pm every Monday to the national
- Non-polio AFP rate is the proportion of non-polio AFP cases per 100,000 among the estimated population under 15 years of age in 2017 (annual target: ≥2/100,000)
- **Non-measles febrile rash illness rate** refers to the proportion of Negative measles cases per 100,000 population
- Annualized maternal mortality rate refers to the maternal mortality rate of a given period of less than one year and it is the number of maternal deaths per 100,000 live births
- Annualized neonatal mortality rate refers to the neonatal mortality ratio of a given period of less than one year and it is the number of neonatal deaths per 1,000 live births
- **Epi-linked** refers to any suspected case that has not had a specimen taken for serologic confirmation but is linked to a laboratory-confirmed case
- **Confirmed case** refers to a case whose specimen has been tested positive or reactive upon laboratory testing, or has been classified as confirmed by either epidemiologic linkage with a confirmed case or clinical compatibility with the disease or condition

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For comments or questions, please contact

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National Public Health Institute of Liberia (NPHIL)

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Data sources

Data and information is provided by the fifteen County Surveillance Officers and National Public Health Reference Laboratory via regular weekly reports, telephone calls and email exchanges. Situations are evolving and dynamic therefore numbers stated are subject to change.