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| Risk category | Probability of human outbreak | Definition | Activities and responses |
| 0 | None | * No adult mosquito biting activity (vector species). * No avian mortality noted. * No suspected human cases documented. | * Monitor and maintain nuisance mosquito populations. * Maintain surveillance activities for both nuisance and known vector species. * Monitor national and regional arbovirus case documentation * Organize disease surveillance live trapping when climatic conditions warrant (High temps >70 degrees – Low temps > 55) * Treat known vector breeding sites with residual materials |
| 1 | Low | * Biting adult mosquitoes active (vector species). -or- * Epizootic activity expected based on onset of transmission in prior years. -or- * Limited or sporadic epizootic activity in birds or mosquitoes. | * Response as in category 0, plus: * Activate systemic program to monitor and reduce vector mosquito abundance. * Conduct weekly RAMP test pools to monitor virus activity (mosquitoes and avian hosts) (July- Aug) * Initiate community outreach focused on personal protection and residential source reduction. * Monitor climatic conditions to evaluate future risk profile. |
| 2 | High | * Sustained transmission activity in mosquitoes or birds. -or- * Veterinary cases reported. -or- * Human case or viremic blood donor reported. * Regional WNV cases or veterinary cases active |  Response as in category 1 plus:   * Intensify and expand adult mosquito control in areas using ground and/or aerial applications where surveillance indicates human risk. * Consider 14 to 21-day ULV intervals * Intensify visible activities in community to increase attention to WNV transmission risk and personal protection measures. * Work to address high risk populations. * Intensify and expand surveillance for human cases. |
| 3 | Outbreak in progress | * Conditions favor continued transmission to humans (i.e., persistent high infection rate in mosquitoes, continued avian mortality, seasonal mosquito population decreases not anticipated for weeks) -or- * Multiple confirmed human cases or viremic blood donors. | * Response as in category 2 plus: * Intensify emergency adult mosquito control program repeating applications as necessary to achieve adequate control. * Monitor effectiveness of vector control efforts * Emphasize urgency of personal protection, including use of repellents, through community leaders and media. * Engage in 14 to 21-day interval region wide adult mosquito treatment regimen |