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*Additional information about BRFSS is available at http://www.cdc.gov/brfss.
†The percentage of persons who completed interviews among all eligible persons, including those who were not successfully contacted.
‡The percentage of persons who completed interviews among all eligible persons who were contacted.
§In 2007, the follow-up COPD module included the following questions: (1) "Have you ever been given a breathing test to diagnose your COPD, chronic bronchitis, or emphysema?" (2) "Would you say that shortness of breath affects the quality of your life?" (3) "Other than a routine visit, have you had to see a doctor in the past 12 months for symptoms related to shortness of breath, bronchitis, or other COPD, or emphysema flare?" (4) "Did you have to visit an emergency room or be admitted to the hospital in the past 12 months because of your COPD, chronic bronchitis, or emphysema?" and (5) "How many different medications do you currently take each day to help with your COPD, chronic bronchitis, or emphysema (categorized as none or at least one medication reported)?" In 2009, the follow-up COPD module included the following questions: (1) "Have you ever been given a breathing test, which measures how much air you can breathe out through a tube, to diagnose your COPD, chronic bronchitis, or emphysema?" (2) "Would you say that shortness of breath affects the quality of your life?" (3) "Other than a routine visit, have you had to see a doctor in the past 12 months for symptoms related to shortness of breath, bronchitis, or other COPD, or emphysema flare?" (4) "During the past 12 months, have you stayed in a hospital overnight because of shortness of breath, COPD, or emphysema flare?" and (5) "Prednisone is a medicine that helps people with breathing problems breathe easier. It is sometimes called Deltasone or Medrol. During the past 12 months, has a doctor ever prescribed prednisone for your breathing problems?"
‖Additional information is available at http://www.nhlbi.nih.gov/health/public/lung/copd/index.htm.

Notes From the Field: Multistate Outbreak of *Salmonella* Altona and Johannesburg Infections Linked to Chicks and Ducklings From a Mail-Order Hatchery—United States, February-October 2011

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Salmonella infections from contact with live poultry (chickens, ducks, turkeys, and geese) continue to be a public health problem. In summer 2011, two clusters of human *Salmonella* infections were identified[1] through PulseNet, a molecular subtyping network for foodborne disease surveillance. Standard outbreak and traceback investigations were conducted. From February 25 to October 10, 2011, a cluster of 68 cases caused by *Salmonella* serotype Altona and a cluster of 28 cases caused by *Salmonella* Johannesburg were identified in 24 states. Among persons infected, 32% of those with *Salmonella* Altona and 75% of those with *Salmonella* Johannesburg were aged ≤5 years. Forty-two of 57 (74%) *Salmonella* Altona patients and 17 of 24 (71%) of *Salmonella* Johannesburg patients had contact with live poultry in the week preceding illness. Most patients or their parents reported purchasing chicks or ducklings from multiple locations of an agricultural feed store chain that was supplied by a single mail-order hatchery. Live poultry were purchased for either backyard flocks or as pets.

Live poultry are commonly purchased from agricultural feed stores or directly from mail-order hatcheries; approximately 50 million chicks are sold annually in the United States. Since 1990, approximately 35 outbreaks of human *Salmonella* infections linked to contact with live poultry from mail-order hatcheries have been reported. These outbreaks highlight the ongoing risk for human *Salmonella* infections associated with live poultry contact, especially for young children.

In response to this ongoing public health problem, officials with local, state, and federal public and animal health agencies, the U.S. Department of Agriculture's National Poultry Improvement Plan (USDA-NPIP), the mail-order hatchery industry, and other partners have collaborated to develop and implement a comprehensive *Salmonella* control strategy. Mail-order hatcheries should comply with management and sanitation practices outlined in the USDA-NPIP *Salmonella* guidelines[2] and should avoid the shipment of hatched chicks between multiple hatcheries before shipping to customers. Educational materials warning customers of the risk for *Salmonella* infection from live poultry contact are available[3] and should be distributed with all live poultry purchases. Preventing these infections will require an integrated approach at the hatchery, agricultural feed store, and consumer levels.

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