To: National Focal Points for Surveillance Cc: National Coordinators

Dear National Focal Points for Surveillance,

We are pleased to announce the upcoming launch of EpiPulse Cases in September 2024. This will be the new platform for reporting indicator-based surveillance data according to the list of EU/EEA notifiable diseases and their case definitions. EpiPulse Cases will be deployed progressively during the course of 2024 and 2025 to include all diseases, health issues, and reporting of isolates for molecular surveillance, according to the two timelines below:

Disease/Health Topic	Sep- 2024	Nov- 2024
Diphtheria (DIPH)		
Invasive <i>H. influenzae</i> disease (HAEINF)		
Measles (MEAS)		
Invasive meningococcal disease (MENI)		
Invasive pneumococcal disease (PNEU)		
Mumps (MUMP)		
Pertussis (PERT)		
Polio (POLI)		
Rubella (RUBE)		
Tetanus (TETA)		
Mpox vaccination (MPOXVACC)		
Escherichia coli (ECOLIISO)		
Listeria monocytogenes(LISTISO)		
AMR in Klebsiella and E. coli (AMRISO)		
Legionella pneumophila (LEGIISO)		
Neisseria meningitidis (MENIISO)		
Campylobacter (CAMPISO)		
Salmonella (SALMISO)		
Mycobacterium tuberculosis (MYCOISO)		

Disease (group)	Mar-2025	Apr-2025	May-2025	Sep-2025	Q4/ 2025
Emerging and vector-borne diseases					
Food-and waterborne diseases					
Legionnaires' disease					
HIV/AIDS					
Antimicrobial resistance					
Antimicrobial consumption					
Sexually transmitted infections					
Hepatitis B and C					
Tuberculosis					
Influenza, RSV, COVID-19					
Healthcare-associated infections					

Around two months prior to any group of diseases being included in EpiPulse Cases, you will receive a notification listing the metadata changes that come with it. Given the staggered deployment of the platform, there will exceptionally be several new metadata releases to review before the end of 2025.

With the current communication you are receiving for approval the metadata changes for VPI diseases and most molecular surveillance subjects. Please provide your feedback by 9th August 2024. The metadata is being shared by ECDC VPI colleagues to the NFPs for VPI simultaneously. The deadline for reporting VPI diseases will be postponed to late November.

The launch of EpiPulse Cases marks the beginning of the end of TESSy which is planned to be fully decommissioned by the end of 2025. Compared to TESSy, EpiPulse Cases offers the following **advantages**:

- It has been designed to handle large (e.g. pandemic) data volumes and will be cloudbased, which will make for faster processing and allow to scale up capacity as required.
- We have substantially reduced the number of mandatory variables. This will lower the threshold for the system accepting your data and will leave it to you to decide if your data quality is sufficient for approval of submission.
- EpiPulse Cases will offer an automated technical and epidemiological validation of your data directly upon upload. The epidemiological validation will be based on a combination of the previous TESSy-inbuilt validation rules, completeness checks for key variables and a comparison with historical data of yours to detect any unexplained aberrations. Instead of TESSy error and warning messages, you will receive a graphic online validation report, the content and format of which will be targeted at epidemiologists and data managers and will point you to possible data quality issues. The first release of this automated validation in EpiPulse Cases will not yet completely replace the expert-driven validation currently following the automated validation in TESSy, but over time, we do expect to fully integrate this second step in the system.
- EpiPulse Cases and the underlying data warehouse are set up in a way that will markedly facilitate its technical maintenance and hence render the platform more robust also from a user perspective.

In addition, national data providers should expect the following main changes:

 Metadata: ECDC has taken the opportunity of the new surveillance platform to increase consistency by harmonising variable names and reference values (formerly known as 'coded values') across diseases where previous differences were not needed from an epidemiological perspective. The formerly mandatory nature of many variables has been removed as it only hampered data submission and resulted in many 'Unknown' values without truly improving overall data quality. Finally, the metadata will no longer be versioned. This means that only the latest metadata will be valid for reporting to EpiPulse Cases. For many diseases, these changes may exceed the scope of the annual routine metadata changes and may therefore require a greater one-off effort when implementing them at the national level. For your convenience, we have attached the updated VPI reporting protocols and the relevant metadata including the changes compared to the current TESSy metadata, which should facilitate the necessary mapping and conversion at national level.

• **User experience:** While the automated validation report in EpiPulse Cases does represent a new feature, the overall logic and steps of reporting national surveillance data to ECDC remain largely the same. However, the user interface will be different from TESSy, and users will need to learn how to navigate a familiar workflow that now comes with a new look and feel.

We believe that EpiPulse Cases will bring palpable improvements and convince users eventually, but we are also aware that the new system may initially pose certain challenges in some Member States. ECDC is committed to easing the transition as much as possible and actively supporting data providers whenever necessary. From September 2024, we will offer online training demos, video tutorials and platform-embedded contextual help for the relevant networks as well as individual hands-on data managerial assistance. Any questions in this context or user feedback may be directed to EpiPulseCases@ecdc.europa.eu. We would also be happy to receive any suggestions for improvement at future disease network meetings, and this year's annual meeting of the National Focal Points for Surveillance may already offer an opportunity for a debrief on first user experiences with the new platform.

We wish to thank you for your cooperation in advance and hope to be able to make EpiPulse Cases a success jointly with you.

Kind regards,

Bruno Ciancio on behalf of the TESSy and EpiPulse Cases teams¹

In attachment

- 1. EpiPulse Cases metadata for VPI and most molecular surveillance (including the changes)
- 2. PDF extract highlighting the metadata changes (from the file above)
- 3. EpiPulse Cases quick guide
- 4. VPI reporting protocols
- 5. Machine to Machine Communication API Specification

¹Catalin Albu, Konstantinos Anthis, Zsolt Bartha, Bruno Ciancio, Emiliano Farinella, Erik Halm, Vicky Lefevre, Georgios Margaronis, Adrian Prodan, and Phillip Zucs.