	The Johns Hopkins Hospital Interdisciplinary Clinical Practice Manual Infection Control	<i>Policy Number</i>	IFC003	
		<i>Effective Date</i>	05/01/2011	
		<i>Approval Date</i>	04/26/2011	
	<i>Subject</i>	Reportable Diseases and Conditions	<i>Page</i>	1 of 4
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I. OBJECTIVES

The primary objective of this policy is to ensure that reportable diseases, conditions, outbreaks and unusual manifestations of disease are reported to the proper authorities and/or responsible parties within one working day (within 48 hours for HIV/AIDS) so that actions can be taken to protect public health.


II. INDICATIONS FOR USE

This policy shall be used when reporting reportable diseases and conditions to the Health Department or Hospital Epidemiology and Infection Control (HEIC) .

III. DEFINITIONS

Outbreak/ Cluster

- A. A foodborne disease outbreak, defined as two or more epidemiologically related cases of illness following consumption of a common food item or items, or one (1) case of the following:
 1. Botulism
 2. Cholera
 3. Fish poisoning such as:
 - a. Ciguatera poisoning
 - b. Scombroid poisoning
 - c. Paralytic shellfish poisoning
 - d. Any other neurotoxic shellfish poisoning
 4. Mushroom poisoning
 5. Trichinosis
- B. Three or more cases of a disease or illness that is not a food-borne outbreak and that occurs in individuals who are not living in the same household, but who are epidemiologically linked.

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- C. An increase in the number of infections; over the usual baseline rateA situation designated by the Secretary of the Maryland Department of Health and Mental Hygiene as an outbreak
- D. One (1) case of:
 - 1. Anthrax
 - 2. Rabies (human)
 - 3. Plague
 - 4. Smallpox
- E. A single case-defined as causative of a food-borne disease outbreak above.

IV. RESPONSIBILITY

- A. Healthcare Providers
 - 1. Report all required diseases and conditions listed in Appendix B: Reportable Diseases and Conditions and report any suspicion of hospital-associated outbreaks or clusters of infections to HEIC. HEIC will investigate and contact the appropriate health department jurisdiction when necessary.
- B. Authorized Prescriber
 - 1. Report diseases and conditions (listed in Appendix A) to the Baltimore City Health Department or the health officer in the county where the provider cares for that person. Use the Maryland Confidential Morbidity Report form (DHMH 1140)Appendix C.
- C. Pathology Including Laboratory
 - 1. The Director of the Medical Laboratory or designee shall report evidence of reportable diseases under statute (Health-General §167;18-205), using the list of diseases and formats specified there.
 - 2. Report any unusual organisms or suspicion of clusters of infections HEIC.HEIC will report to the appropriate health authorities as necessary.
- D. Hospital Epidemiology/Infection Control (HEIC)Hospital Epidemiology/Infection Control (HEIC)
 - 1. Receive calls from healthcare providers or the laboratory regarding possible reportable diseases,unusual pathogens, clusters of infections or outbreaks (Appendix B).Investigate and report to the health department as necessary.

V. PROCEDURE

- A. Process
 - 1. Reporting of a single case of reportable communicable diseases or conditions:
 - a. Authorized Prescribers shall report all diseases and conditions listed in Appendix A to the Baltimore City Health Department or the health officer where the provider cares for the patient using DHMH 1140 form (Appendix C)
 - b. Report within one working day of diagnosis or suspected diagnosis, or immediately by telephone for outbreaks and diseases or conditions noted on Appendix A.
 - c. Report forms may be faxed for all diseases and conditions except AIDS or HIV infection which must be mailed. If faxed, fax to Baltimore City Health Department, fax number (410-625-0688). If mailed, place in a sealed envelope marked 'confidential'.Mail to the Baltimore City Health Department, Communicable Disease Division, 1001 E. Fayette St. Baltimore, MD 21202.
 - d. Contact Baltimore City Health Department at telephone: 410-396-4436 with questions.Additional information can be found at Internet site at <http://www.edcp.org>.
 - e. Maryland local health departments will often follow up on the initial report by contacting the healthcare provider for additional disease specific information.
 - f. Should the health department need to contact the patient, the advice and assistance of the reporting health care provider will ordinarily be sought first. HIPAA: The HIPAA Privacy Rule permits authorized prescribers and other covered entities to disclose protected health information, without a patient's written authorization, to

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legally authorized public health authorities in order to prevent or control the spread of disease. This includes conducting public health surveillance, investigations, or interventions.

- g. Healthcare providers shall report select diseases and conditions to HEIC (See Appendix B).
2. Reporting of Outbreaks or Cluster of Infections
 1. Community Associated: The provider who suspects a community outbreak or cluster of infections shall report the findings to BCHD at 410-396-4436.
 2. Hospital-Associated: Any healthcare worker who suspects a cluster of infections or an outbreak shall contact HEIC at 5-8384 or pager 3-3855. HEIC shall investigate and report the findings to the health department as necessary.
3. Reporting by Laboratories:
 - a. The Director of the Laboratory shall report evidence of disease under COMAR 10.18.02.05. Use DHMH form 1280 (see Appendix D); not DHMH 1140.
 - b. The laboratory shall report all patients with specimens suggestive of HIV infection including low CD4+ lymphocyte counts. DHMH form 4492 is to be used (see appendix E). Forms shall be mailed to the local health officer or the Maryland AIDS Administration within 48 hours. These forms may never be faxed.
 - c. Rules and procedures for laboratories are different than for health care providers.
4. Reporting of Sexually Transmitted Diseases (STD's) -- Not Including HIV
 - a. For reports of STDs, complete both the general section of the DHMH 1140 morbidity report and the STD specific section below it.
5. Reporting of HIV/AIDS
 - a. Providers shall report HIV/AIDS by completing both the general section of the DHMH 1140 morbidity report and the HIV/AIDS specific section below it. Effective 2007, HIV is to be reported by patient name.
 - b. HIV/AIDS shall be reported within one working day either by phone or mail to BCHD. Faxing is not permitted.
 - c. The laboratory shall report all patients with specimens suggestive of HIV infection including low CD4+ lymphocyte counts. DHMH form 4492 is to be used (Appendix E). Forms shall be mailed to the local health officer or the Maryland AIDS Administration within 48 hours. There forms may never be faxed.
6. Reporting of all cases of Tuberculosis (Confirmed or Suspected). Report the following:
 1. All persons for whom at least two anti-tuberculosis drugs are prescribed.
 2. All newly diagnosed tuberculosis disease regardless of the number of drugs prescribed. This includes all cases found at the time of death or after death, and all cases previously classified as 'primary' tuberculosis.
 3. All suspected tuberculosis disease awaiting bacteriological confirmation. Amendments to a 'suspect' report shall be submitted when bacteriological results become available.
 4. When reporting tuberculosis, complete both the general section of the Maryland Department of Health and Mental Hygiene (DHMH 1140) morbidity report and the TB specific section below it.
 5. Consider voluntary reporting of positive tuberculin skin tests in children less than one year of age since it enables local health department investigators to help identify a source case.


VI. REPORTABLE CONDITIONS

See Appendix A and Appendix B.

VII. EDUCATION AND COMMUNICATION

This policy will be communicated to the appropriate JHH personnel via the following channels:

1. Authorized Prescriber Advisors, Residency Training Coordinators, and Department Chiefs shall be responsible for Authorized Prescriber education. An update to the policy shall be included in the Medical Staff Newsletter.
2. Pathology Department management shall be responsible for training appropriate staff.

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3. Physician Advisors, Residency Coordinators, Department Chiefs and Department Management shall be responsible to train new employees regarding the policy as appropriate, and to communicate updates to the protocol.
4. This policy shall be placed in the Interdisciplinary Clinical Practice Manual on the JHH Intranet site www.insidehopkinsmedicine.org/icpm and the HEIC web site at www.hopkinsmedicine.org/heic . Paper distributions shall be made to the Functional Unit Nursing offices in the event of web access difficulty.

VIII. SUPPORTIVE INFORMATION

See Also:

- Article – Health – General, Section 18-201, 202, 205 Annotated Code of Maryland
- Annotated Code of Maryland (COMAR 10.06.01.03A)
- Article II, Section 206 of the City Health Code
- Division of State Documents – Code of Maryland Regulations 10.06.01.03. 10.18.03 and others www.dsd.state.md.us
- HIPAA Privacy Rule <http://www.dhmf.state.md.us/hipaa/pdf/dhmf1.pdf> OR www.cdc.gov/mmwr/preview/mmwrhtml/su5201a1.ht
- JHH Corporate and Administrative Policies and Procedures Manual
 - [EP022 Bioterrorism: Code Yellow](#)
- Local Health Department of the Maryland Department of Health and Mental Hygiene – Division of Communicable Disease Surveillance (410-767-6712)
- Maryland Department of Health and Mental Hygiene (DHMH) www.dhmf.state.md.us
- Maryland General Assembly Home Page – state laws covering lab reporting: §167; 18-205 and others www.mlis.state.md.us
- Maryland HIPAA Information www.dhmf.state.md.us/hipaa/
- Office of Epidemiology and Disease Control Programs www.edcp.org
- General communicable disease information; reporting requirements, etc.
- Local health department telephone numbers and addresses.
- U. S. Centers for Disease Control and Prevention's "Sexually Transmitted Diseases Treatment Guidelines 2002," (MMWR Recommendations and Reports May 10, 2002, Vol.51, No. RR-6), www.cdc.gov/std/treatment/TOC2002TG.htm

Sponsor:

- Medical Care Evaluation Committee

Developer:

- Hospital Epidemiology and Infection Control (HEIC)

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Vice President for Nursing & Patient Services

Vice President for Medical Affairs

Date:

Date: