Know Your ABCs: A Quick Guide to Reportable Infectious Diseases in Ohio

From the Ohio Administrative Code Chapter 3701-3; Effective May 1, 2015

Class A:

Diseases of major public health concern because of the severity of disease or potential for epidemic spread — report immediately via telephone upon recognition that a case, a suspected case, or a positive laboratory result exists.

- Anthrax
- · Botulism, foodborne
- Cholera
- Diphtheria
- · Influenza A novel virus infection
- Measles

- Meningococcal disease
- Middle East Respiratory Syndrome (MERS)
- Plague
- · Rabies, human
- · Rubella (not congenital)
- Severe acute respiratory syndrome (SARS)
- Smallpox
- Tularemia
- Viral hemorrhagic fever (VHF), including Ebola virus disease, Lassa

fever, Marburg hemorrhagic fever, and Crimean-Congo hemorrhagic

· Staphylococcus aureus, with

resistance to

invasive (IGAS)

newborn

(STSS)

Syphilis

Tetanus

Trichinellosis

(MDR-TB)

· Typhoid fever

disease (ISP)

resistance or intermediate

vancomycin (VRSA, VISA)

Streptococcal disease, group A,

· Streptococcal disease, group B, in

· Streptococcal toxic shock syndrome

Streptococcus pneumoniae, invasive

Toxic shock syndrome (TSS)

· Tuberculosis (TB), including

multi-drug resistant tuberculosis

Yellow fever

Any unexpected pattern of cases, suspected cases, deaths or increased incidence of any other disease of major public health concern, because of the severity of disease or potential for epidemic spread, which may indicate a newly recognized infectious agent, outbreak, epidemic, related public health hazard or act of bioterrorism.

Class B:

Disease of public health concern needing timely response because of potential for epidemic spread — report by the end of the next business day after the existence of a case, a suspected case, or a positive laboratory result is known.

- Amebiasis
- Arboviral neuroinvasive and nonneuroinvasive disease:
 - · Chikungunya virus infection
 - Eastern equine encephalitis virus disease
 - LaCrosse virus disease (other California serogroup virus disease)
 - · Powassan virus disease
 - St. Louis encephalitis virus disease
 - · West Nile virus infection
 - Western equine encephalitis virus disease
 - Other arthropod-borne diseases
- Babesiosis
- Botulism
 - infant
 - wound
- Brucellosis
- · Campylobacteriosis
- Chancroid

- · Chlamydia trachomatis infections
- Coccidioidomycosis
- · Creutzfeldt-Jakob disease (CJD)
- · Cryptosporidiosis
- Cyclosporiasis
- Dengue
- E. coli 0157:H7 and Shiga toxin-producing E. coli (STEC)
- · Ehrlichiosis/anaplasmosis
- Giardiasis
- · Gonorrhea (Neisseria gonorrhoeae)
- Haemophilus influenzae (invasive disease)
- Hantavirus
- Hemolytic uremic syndrome (HUS)
- Hepatitis A
- Hepatitis B (non-perinatal)
- Hepatitis B (perinatal)
- Hepatitis C
- Hepatitis D (delta hepatitis)
- Hepatitis E
- Influenza-associated hospitalization
- Influenza-associated pediatric

- mortality
- · Legionnaires' disease
- · Leprosy (Hansen disease)
- Leptospirosis
- Listeriosis
- Lyme disease
- Malaria
- Meningitis:
 - Aseptic (viral)
 - Bacterial
- Mumps
- Mycobacterial disease, other than tuberculosis (MOTT)
- Pertussis
- Poliomyelitis (including vaccineassociated cases)
- Psittacosis
- Q fever
- Rubella (congenital)
- Salmonellosis
- Shigellosis
- Spotted Fever Rickettsiosis, including Rocky Mountain spotted fever (RMSF)
- Typhus fever
- Varicella
- Vibriosis
- AIDLIO2I2
- Yersiniosis

Class C:

Report an outbreak, unusual incident or epidemic of other diseases (e.g. histoplasmosis, pediculosis, scabies, staphylococcal infections) by the end of the next business day.

Outbreaks:

- Community
- Foodborne

- Healthcare-associated
- Institutional

- Waterborne
- Zoonotic

NOTE:

Cases of AIDS (acquired immune deficiency syndrome), AIDS-related conditions,
HIV (human immunodeficiency virus) infection, perinatal exposure to HIV,
all CD4T-lymphocyte counts and all tests used to diagnose HIV must be reported on forms and in a manner prescribed by the Director.



OHIO'S COMMUNICABLE DISEASE REPORTING REQUIREMENTS

WHO must report?

<u>Healthcare providers (physicians, hospitals, infection preventionists)</u> with knowledge of a case or suspect case of a disease which is required to be reported

<u>Laboratorians</u> that examine specimens of human origin with evidence of diseases which are required to be reported

<u>Any individual</u> having knowledge of a person suffering from a disease suspected of being communicable

WHAT must be reported?

Diseases on Ohio's ABC list

<u>Healthcare providers</u> must report the following:

- ✓ Name of case or suspect case
- ✓ Diagnosis or suspected diagnosis
- ✓ Date of birth of case or suspect case
- ✓ Sex of case or suspect case
- √ Telephone number of case or suspect case
- ✓ Street address, including city, state and zip code of case or suspect case
- ✓ Supplementary surveillance information as outlined in Section 3 for the specific disease being reported
- ✓ Healthcare provider name, telephone number and street address (including city, state and zip code)

<u>Laboratorians</u> must report the following:

- ✓ Name of case or suspect case
- ✓ Date of birth of case or suspect case
- ✓ Sex of case or suspect case
- ✓ Street address, including city, state and zip code of case or suspect case
- ✓ Laboratory test information
 - Specimen identification number
 - Specimen collection date
 - Specimen type
 - Test name
 - Test result
 - Organism and serotype, as applicable
- ✓ Healthcare provider name, telephone number and street address (including city, state and zip code)

WHEN must a report be made?

Class A disease – <u>immediately</u> by phone

Class B disease – by the end of the next business day

Class C disease – by the end of the next business day

WHERE must the report be made?

Healthcare providers and laboratorians

- To the local health jurisdiction in which the case or suspected case resides (unless otherwise noted in <u>Section 3</u>)
- If residence is unknown, report to the local health jurisdiction in which the healthcare provider or laboratory is located

- If residence is outside of Ohio and reporting via electronic laboratory reporting (ELR), report to the state of patient residence
- If residence is outside of Ohio and not reporting via ELR, report to the local health jurisdiction in which the health care provider or laboratory is located

Local health jurisdictions

To ODH

HOW must the report be made?

Healthcare providers

- Class A immediately by phone; follow-up with <u>HEA 3334</u> or supplementary surveillance forms as instructed by the local health jurisdiction; follow-up reports can also be made electronically through direct entry into the <u>Ohio Disease</u> Reporting System (ODRS)
- Class B and C <u>HEA 3334</u> and supplementary surveillance forms, as appropriate;
 Class B and C reports can also be made electronically through direct entry into ODRS
- Healthcare providers that report 200 or more Class A, B or C diseases each year should consider electronic reporting through direct entry into ODRS

Laboratorians

- Class A immediately by phone, follow-up with <u>HEA 3333</u> as instructed by the local health jurisdiction; follow-up reports can also be made electronically through direct entry into the <u>Ohio Disease Reporting System (ODRS)</u> or through Electronic Laboratory Reporting
- Class B and C <u>HEA 3333</u>; Class B and C reports can also be made electronically through direct entry into ODRS or through ELR
- Laboratories that report 200 or more Class A, B or C diseases each year should be working towards ELR reporting

Local health jurisdictions

- Class A immediately by phone; follow-up reports should be directly entered into the Ohio Disease Reporting System (ODRS)
- Class B and C direct entry into ODRS
- Local health jurisdictions should assure that reports entered into ODRS are complete; supplementary surveillance information as outlined in <u>Section 3</u> should be mailed to ODH at the following address:

Ohio Department of Health Outbreak Response and Bioterrorism Investigation Team Bureau of Infectious Diseases 246 N. High St. Columbus, OH 43215

WHY must a report be made?

- Disease control and prevention as outlined in <u>Section 3</u> for the specific disease being reported
- Documentation of the distribution of disease in Ohio
- Identification of outbreaks