



Changes to North Dakota's Reportable Conditions

Lunch and Learn Webinar

January 7, 2020

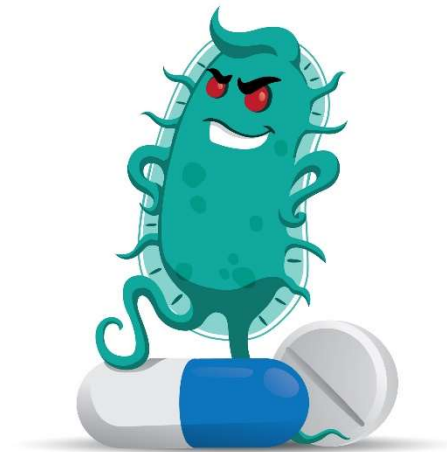
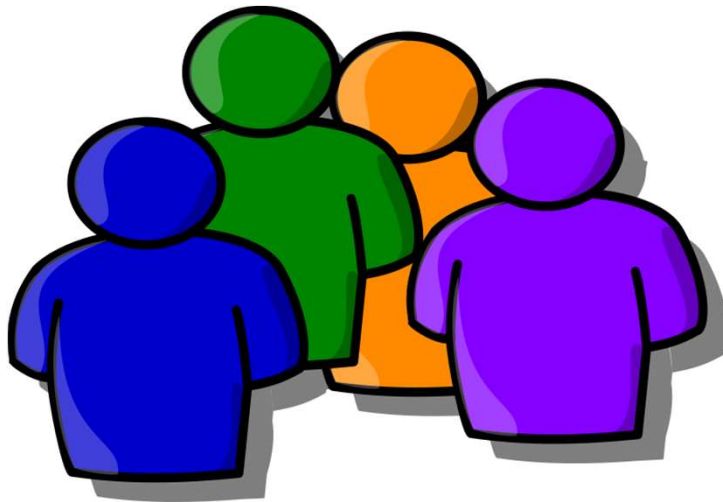
Noon-1:00 pm

Kirby Kruger
Director, Division of Disease Control
North Dakota Department of Health

Tracy K. Miller, PhD, MPH
State Epidemiologist
North Dakota Department of Health

Objectives for Today's Webinar

- Define newly reportable infectious diseases
- Define newly reportable non-infectious conditions/injuries
- Provide information how conditions can be reported
- Provide information on case definitions of those that need to be reported.



New Reportable Conditions/Injury List

NORTH Dakota | Health
Be Legendary.™

Mandatory Reportable Infectious Conditions
If highlighted red, report immediately: 800-472-2180 or 701-328-2378
Report all other conditions within one business day

<p>Acute Flaccid Myelitis</p> <p>Anaplasmosis</p> <p>Anthrax ♦</p> <p>Arboviral infection (other)</p> <p>Babesiosis</p> <p>Botulism ♦</p> <p>Brucellosis ♦</p> <p>Campylobacteriosis</p> <p>Candida auris ♦</p> <p>Carbapenem-resistant organisms</p> <ul style="list-style-type: none"> Enterobacteriaceae ♦ Pseudomonas aeruginosa ♦ <p>Chickenpox (varicella)</p> <p>Chikungunya virus disease</p> <p>Chlamydial infection</p> <p>Cholera ♦</p> <p>Cluster of severe or unexplained illnesses and deaths</p> <p>Coccidioidomycosis</p> <p>Creutzfeldt-Jakob disease</p> <p>Cryptosporidiosis</p> <p>Cyclosporiasis</p> <p>Dengue</p> <p>Diphtheria ♦</p> <p>Eastern equine encephalitis ♦</p> <p>E. coli (Shiga toxin-producing) ♦</p> <p>Ehrlichiosis</p> <p>Foodborne/waterborne outbreaks</p> <p>Giardiasis</p> <p>Glanders ♦</p> <p>Gonorrhea</p> <p>Haemophilus influenzae (invasive) ♦</p> <p>Hantavirus ♦</p> <p>Hemolytic uremic syndrome</p> <p>Hepatitis A ♦</p> <p>Hepatitis B</p>	<p>Hepatitis C*</p> <p>Hepatitis D</p> <p>Hepatitis E</p> <p>HIV/AIDS infection**</p> <p>Influenza</p> <ul style="list-style-type: none"> Pediatric deaths Seasonal Suspect novel, PCR influenza A unsubtypeable ♦ <p>Jamestown Canyon virus disease</p> <p>Laboratory incidents with possible release of category A agents or novel influenza virus ♦</p> <p>La Crosse encephalitis</p> <p>Legionellosis</p> <p>Leptospirosis</p> <p>Listeriosis ♦</p> <p>Lyme disease</p> <p>Malaria ♦</p> <p>Measles (rubeola) ♦</p> <p>Melioidosis ♦</p> <p>Meningococcal disease (invasive) ♦</p> <p>Mumps ♦</p> <p>Nipah virus infections ♦</p> <p>Nosocomial outbreaks</p> <p>Novel severe acute respiratory illness ♦</p> <p>Pertussis</p> <p>Plague ♦</p> <p>Poliomyelitis ♦</p> <p>Powassan virus disease</p> <p>Pregnancy in person infected with:</p> <ul style="list-style-type: none"> Hepatitis B HIV <p>Q fever ♦</p>	<p>Rabies</p> <ul style="list-style-type: none"> Animal Human ♦ <p>Rocky Mountain spotted fever</p> <p>Rubella ♦</p> <p>Salmonellosis ♦</p> <p>Scabies outbreaks in institutions</p> <p>Shigellosis ♦</p> <p>Smallpox ♦</p> <p>Staphylococcus aureus</p> <ul style="list-style-type: none"> Vancomycin-resistant and intermediate resistant (VRSA and VISA) – any site ♦ <p>Staphylococcus enterotoxin B intoxication ♦</p> <p>St. Louis encephalitis</p> <p>Streptococcus pneumoniae infection (invasive) ♦</p> <p>Syphilis</p> <p>Tetanus</p> <p>Tickborne disease (other)</p> <p>Trichinosis</p> <p>Tuberculosis***</p> <ul style="list-style-type: none"> Disease ♦ Infection <p>Tularemia ♦</p> <p>Typhoid fever ♦</p> <p>Unexplained or emerging critical illness/death</p> <p>Vibriosis ♦</p> <p>Viral hemorrhagic fevers ♦</p> <p>Weapons of Mass Destruction suspected event ♦</p> <p>Western equine encephalitis</p> <p>West Nile virus</p> <p>Yellow fever ♦</p> <p>Zika virus</p>
--	--	--

♦ Send isolate or sample to North Dakota Department of Health Division of Microbiology.
 ♦ This is a Select Agent when confirmed. Notify the Division of Microbiology at 701-328-6272. Report any possible lab exposures.
 *Hepatitis C: All positive/reactive test results, hepatitis C genotypes, all hepatitis C nucleic acid test results (including nondetectable)
 **HIV/AIDS: Any positive/reactive test results, gene sequencing and drug resistance patterns, all HIV nucleic acid test results (including nondetectable), all CD4 test results
 ***TB: All positive PPD & IGRA results, All results for AFB Smears, cultures and rapid methodologies performed when M. tuberculosis complex is suspected

NORTH Dakota | Health
Be Legendary.™

Other Mandatory Reportable Conditions
If highlighted red, report immediately: 701-328-2372
Report all other conditions within seven days

- Autism*
- Cancer+
- Cluster of severe or unexplained illnesses or deaths
- Critical congenital heart disease (CCHD)
- Fetal alcohol syndrome (FAS)
- Lead level results (all)
- Neonatal abstinence syndrome (NAS)
- Overdoses
- Suicide and suicide attempts
- Tumors of the central nervous system+
- Violent deaths^
- Visible congenital deformity

^ Homicides, legal intervention, unintentional fire-arm related injury death, deaths of unknown intent and terrorism.

Mandatory Reportable Conditions

88

infectious disease
reporting
requirements.



12

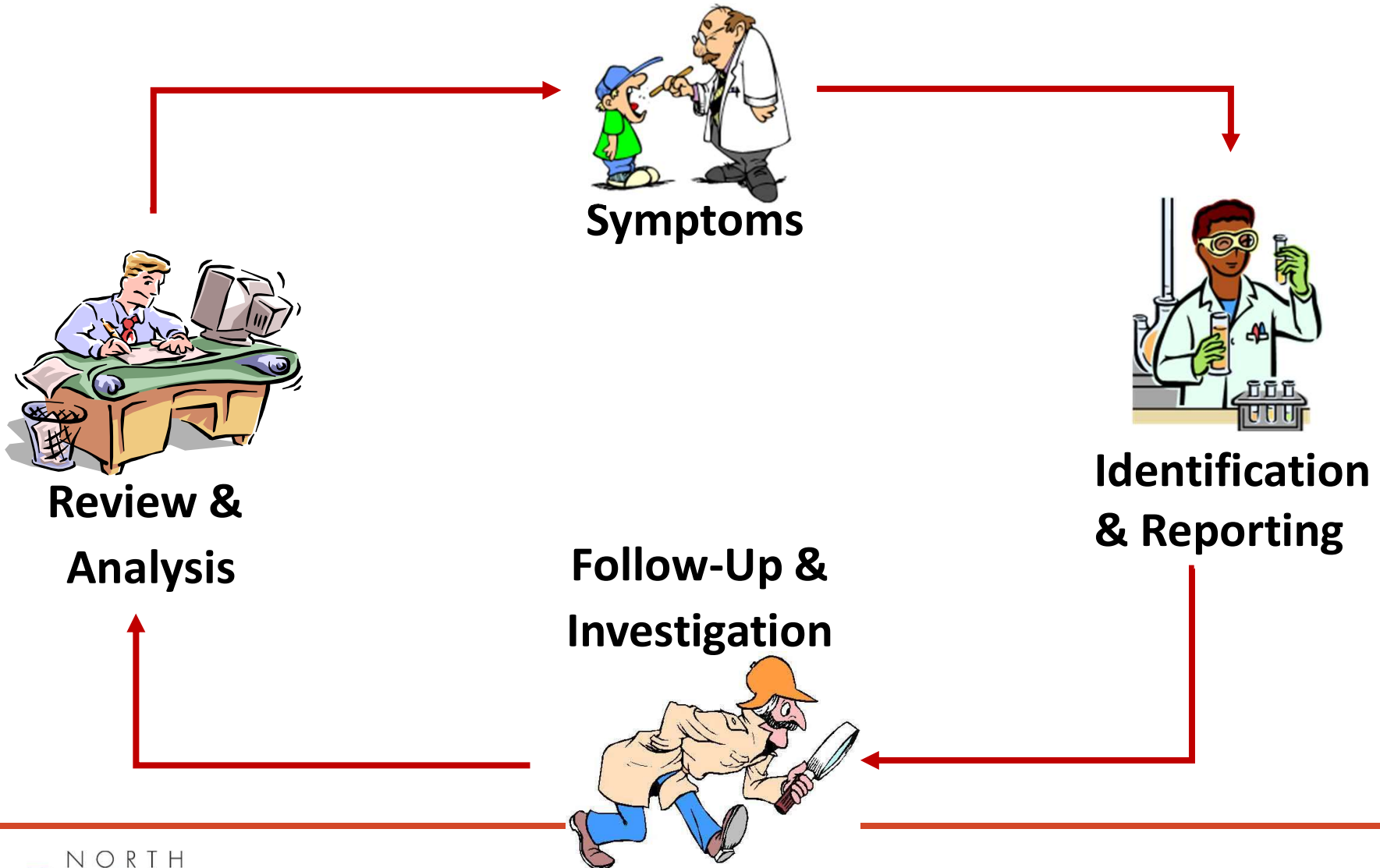
non-infectious reporting
requirements.



Infectious Disease Reporting



Infectious Disease Reporting



Newly Added

New infectious diseases added to the reportable conditions list:

- Acute flaccid myelitis (AFM)
- *Candida auris* fungal infections/colonization
- Cluster of severe or unexplained illnesses or deaths
- Cyclosporiasis
- Leptospirosis



Reporting Updates

- “Unusual cluster of severe or unexplained illnesses or deaths” was replaced with “cluster of severe or unexplained illnesses or deaths”
- Appropriate laboratory samples are required to be submitted for hepatitis A infections
- Appropriate laboratory samples are required to be submitted for novel and unsubtypable influenza
- Appropriate laboratory samples are required to be submitted for mumps
- Tuberculosis is still reportable, however, any laboratory results suggesting an infection with MTB complex, including all AFB smears need to be reported.

Deleted Reportable Conditions

- *Clostridium perfringens* intoxication



How to Report

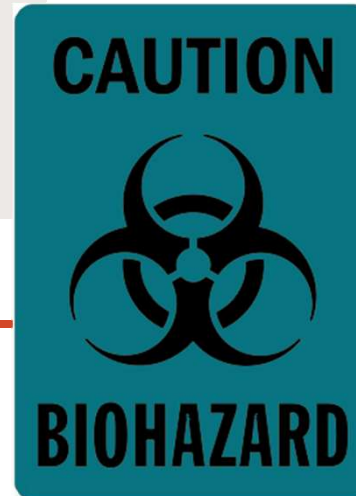
- Medical Laboratories can and are recommended to report electronically
 - We have initiated the rule-making process to update the code to require electronic laboratory reporting
- Online report card at
 - <https://www.ndhealth.gov/disease/reportcard/>
- Telephone
 - 1-800-472-2180 or 701-328-2378. After hours reporters will be given the option to talk immediately to an epidemiologist
 - Certain, high priority infections/conditions should be reported immediately by phone.
 - Some require laboratory samples and some are designated as potential bioterrorism agents.



When to Report

- All reports should be made within one business day
- High priority reports should be made immediately (highlighted in red) by phone

Acute Flaccid Myelitis
Anaplasmosis
Anthrax  
Arboviral infection (other)
Babesiosis
Botulism  
Brucellosis  



Non-Infectious Reporting



Newly Added

- Critical Congenital Heart Disease
- Fetal Alcohol Syndrome
- Neonatal Abstinence Syndrome
- Overdoses
- Suicides and suicide attempts
- Violent death



How to Report

- Online report card at
 - <https://www.ndhealth.gov/disease/reportcard/>
- Telephone
 - 701-328-2372
- Automated Reporting
 - Reporting can take time & resources. Much like automated lab reporting, our goal is to find ways to automate reporting to reduce manual entry.



When to Report

- All reports should be within 7 business days of confirmation
- High priority reports should be made immediately (highlighted in red) by phone

- Autism
- Cancer+
- Cluster of severe or unexplained illnesses or deaths
- Critical congenital heart disease (CCHD)
- Fetal alcohol syndrome (FAS)
- Lead level results (all)
- Neonatal abstinence syndrome (NAS)
- Overdoses
- Suicide and suicide attempts
- Tumors of the central nervous system+
- Violent deaths^
- Visible congenital deformity



Which suicide attempts need to be reported?

ONLY acute cases presenting to the ER, on/after January 1, 2020 (whether conscious or unconscious) that require hospitalization. Past suicide attempts among those seeking treatment/help, do not need to be reported.



Which Overdoses need to be reported?

ONLY acute cases presenting to the ER, on/after January 1, 2020 (whether conscious or unconscious) that require hospitalization. Overdoses include those due to the excessive “recreational” use of drugs, poisons, alcohol, medications, etc.



Any Questions??

Additional people available to answer questions:

- Eric Hieb, ND Health Information Network
- Kim Hruby, Director, Special Health Services Division
- Kodi Pinks, Program Manager/ND Violent Death Program
- Grace Njau, Program Manager/ ND PRAMS

