### HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Public Safety SECTION: Infection Control - Reporting

Prisons

POLICY # IC-3

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SUBJECT: Communicable Disease EFFECTIVE DATE: January 2016 SUPERCEDES DATE: February 2012

# **PURPOSE**

To provide guidelines on reporting communicable disease.

#### **POLICY**

The Department of Public Safety, Prisons, Health Services Section will comply with NC Communicable disease laws.

# **PROCEDURE**

- A. To comply with the North Carolina Communicable Disease Reporting law, the following named diseases and conditions are required to be reported within the time period specified after the disease or condition is reasonably expected to exist:
  - 1. acquired immune deficiency syndrome (AIDS) -24 hours;
  - 2. anthrax Immediately;
  - 3. botulism Immediately;
  - 4. brucellosis 7 days;
  - 5. campylobacter infection 24 hours;
  - 6. chancroid 24 hours;
  - 7. chlamydial infection (laboratory confirmed) 7 days;
  - 8. cholera 24 hours
  - 9. Creutzfeldt-Jakob disease-7days:
  - 10. cryptosporidiosis 24 hours;
  - 11. cyclosporiasis 24 hours;
  - 12. dengue 7 days;
  - 13. diphtheria 24 hours;
  - 14. Escherichia coli, shiga toxin-producing-24 hours;
  - 15. ehrlichiosis 7 days;
  - 16. encephalitis, arboviral 7 days;
  - 17. foodborne disease, including but not limited to Clostridium perfringens, staphylococcus, and Bacillus cereus 24 hours;
  - 18. gonorrhea 24 hours;
  - 19. granuloma inguinale 24 hours;
  - 20. Haemophilus influenzae, invasive disease 24 hours;
  - 21. Hantavirus infection 7days
  - 22. Hemolytic- uremic syndrome- 24 hours;
  - 23. Hemorrhagic fever virus infection immediately;
  - 24. hepatitis A 24 hours;
  - 25. hepatitis B 24 hours;
  - 26. hepatitis B carriage 7 days;
  - 27. hepatitis C, acute 7 days;
  - 28. human immunodeficiency virus infection (HIV) infection confirmed -24 hours;
  - 29. influenza virus infection causing death in persons less than 18 years of age-24 hours;
  - 30. legionellosis 7 days;
  - 31. leprosy-7days
  - 32. leptospirosis 7 days;
  - 33. listeriosis-24 hours
  - 34. Lyme disease 7 days;

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- 35. lymphogranuloma venereum 7 days;
- 36. malaria 7 days;
- 37. measles (rubeola) 24 hours;
- 38. meningitis, pneumococcal 7 days;
- 39. meningococcal disease 24 hours;
- 40. monkeypox-24 hours;
- 41. mumps 7 days;
- 42. nongonococcal urethritis 7 days;
- 43. novel influenza virus infection-immediately;
- 44. plague-immediately;
- 45. pelvic inflammatory disease-7days;
- 46. paralytic poliomyelitis 24 hours;
- 47. psittacosis 7 days;
- 48. Q fever 7 days;
- 49. rabies, human 24 hours;
- 50. Rocky Mountain spotted fever 7 days;
- 51. rubella 24 hours;
- 52. rubella congenital syndrome 7 days;
- 53. salmonellosis 24 hours;
- 54. severe acute respiratory syndrome (SARS)-24hours;
- 55. shigellosis 24 hours;
- 56. smallpox-immediately;
- 57. Staphylococcus aureus with reduced susceptibility to vancomycin-24hours;
- 58. streptococcal infection, Group A, invasive disease 7days
- 59. syphilis 24 hours;
- 60. tetanus 7 days;
- 61. toxic shock syndrome 7 days;
- 62. trichinosis 7 days;
- 63. tuberculosis 24 hours;
- 64. tularemia Immediately;
- 65. typhoid 24 hours;
- 66. typhoid carriage (Salmonella typhi) 7 days;
- 67. typhus, epidemic (louse-borne) 7 days;
- 68. vaccinia 24 hours;
- 69. vibrio infection (other than cholera) 24 hours
- 70. whooping cough 24 hours;
- 71. yellow fever 7 days.
- B. When reporting a disease or condition which is required pursuant to G.S. 130A 134; 130A 135, 130A 141 and 15A NCAC 19A .0101, the report shall be made to the local health department and medical services as follows:
  - 1. For diseases and conditions required to be reported within 24 hours, the initial report shall be made by telephone to both the health department and the Division of Prisons Infection Control Coordinator. The written report shall be made within 7 days, except syphilis, which shall be reported as outlined in the sexually transmitted disease policy.
  - 2. In addition to the requirements above, the report shall be made on the communicable disease card provided by the Division of Health and Human Services (DHHS) and shall include the name and address of the patient, the name and address of any minor's parent or guardian, and all other pertinent epidemiological information requested on the form.

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- 3. Communicable disease report cards and surveillance forms are available online from DHHS, Epidemiology Division, PO Box 27687, Raleigh, N.C. 27611-7687 and local county health departments.
- 4. Confirmed communicable diseases will be documented on the OPUS MS02 screen with the appropriate ICD.9 Code. Supporting laboratory tests and results will be entered into OPUS on the MS03 and MS11 screens.
- C. Isolation of patients with communicable disease
  - To protect the inmate population from communicable diseases, all inmates reasonably suspected of having a
    communicable disease which requires isolation, will be isolated immediately in one of the Division's health
    care facility isolation rooms. The DOP will use the most recent edition of <u>Control of Communicable Disease</u>
    <u>Manual</u> as the guideline for determining the type and duration of isolation.
  - 2. AFB isolation for suspected or confirmed cases of pulmonary tuberculosis:
    - a. Will be at facilities that have the required negative pressure rooms (See TX IV-2).
    - b. Shall be considered for continuation throughout the treatment for patients with multi-drug resistant tuberculosis (See TX IV-2).
  - 3. Isolation shall be continued until the patient is determined to be non-infectious, using Center for Disease Control guidelines for discontinuing category specific precautions.

Paula Y. Smith, M.D., Chief of Health Services

Date

SOR: Infection Control Coordinator