

# INDIANA COMMUNICABLE DISEASE REPORTING UPDATES

March 2023

# Indiana Communicable Disease Rule Changes

- Streamlined timeframes for reporting
  - Immediately
  - Within one working day
- Updated reportable disease list for hospitals/providers as well as a reportable result/pathogen list for laboratories
- Changes effective April 1



# Indiana Communicable Disease Rule Changes

# 2023 Indiana Reportable Disease List

- Audience: Healthcare providers and hospitals
- Lists the name of reportable <u>diseases/conditions</u>

# 2023 Indiana Reportable Result/Pathogen List

- Audience: Laboratorians
- Lists the name of reportable pathogens/organisms



### 2023 Indiana Reportable Disease List for Healthcare Providers and Hospitals

410 IAC 1-2.5-75 & 76



### REPORT IMMEDIATELY ON SUSPICION

Anthrax Botulism

Cholera (Vibrio cholerae O1, O139, or toxigenic) Diphtheria

Eastern equine encephalitis virus (EEEV) disease Hemolytic uremic syndrome (HUS), post-

diarrheal

Hepatitis, viral, Type B, pregnant woman (acute and chronic) or perinatally exposed infant

Influenza A, Novel Measles (Rubeola)

Melioidosis (Burkholderia pseudomallei)

Meningococcal disease, invasive Middle East Respiratory Syndrome (MERS)

Plague **Poliomyelitis**  Rabies, human

Rubella (German Measles)

Rubella congenital syndrome

Severe Acute Respiratory Syndrome (SARS) Smallpox (Variola infection)

Tularemia

Viral hemorrhagic fever, filoviruses Ebola virus

Marburg virus

Viral hemorrhagic fever, other

Crimean-Congo hemorrhagic fever virus Guanarito virus Junin virus

Lassa virus Luio virus Machupo virus Sabia virus

### TO REPORT:

Step 2:

- Immediately Reportable: complete steps 1-2
- Within One Working Day: complete step 2

Step 1: Call 317-233-7125 317-233-1325 (After hours)



- NBS users: Report conditions via Morbidity Report in NBS
- Non-NBS users: Report with **this** form

### REPORT WITHIN ONE WORKING DAY

Acquired Immunodeficiency Syndrome (AIDS) Acute Flaccid Myelitis (AFM)

Anaplasmosis

Animal bite or exposure

Arboviral disease or infection, domestic West Nile virus (WNV)

St. Louis encephalitis virus (SLEV) Western equine encephalitis virus

(WEEV)

California serogroup viruses

(La Crosse virus (LACV), Jamestown Canyon virus (JCV)), Powassan virus (POWV)

Arboviral disease or infection, imported

Chikungunya virus (CHIKV)

Dengue virus (DENV) Zika virus (ZIKV)

Babesiosis Brucellosis

Campylobacteriosis

Candida auris and unusual Candida spp. (species other than C. albicans,

C. parapsilosis, C. dubliniensis,

C. lusitaniae, C. tropicalis or C. krusei)

Carbapenemase-Producing Organisms (CPO)

Chancroid

Chlamydia trachomatis, genital infection Lymphogranuloma venerum

Coccidioidomycosis COVID-19, cases and deaths

Cryptosporidiosis

Cyclosporiasis

Escherichia coli (E. coli) infection (Shiga toxinproducina E. coli (STEC)) includina. but not limited to. E. coli O157 and other serogroups)

Giardiasis Gonorrhea

Disseminated gonococcal infection Granuloma inquinale

Haemophilus influenzae, invasive disease, (including antimicrobial susceptibility

testing)

Hansen's disease (leprosy)

Hantavirus infection (pulmonary and non-pulmonary), including, but not limited to: Sin Nombre virus

Seoul virus Hepatitis, viral, Type A

Hepatitis, viral, Type B (acute and chronic) Hepatitis, viral, Type C (acute and chronic)

Hepatitis, viral, Type C, pregnant woman (acute or chronic) or perinatally

exposed infant Hepatitis, viral, Type Delta

Hepatitis, viral, Type E Hepatitis, viral, unspecified

Histoplasmosis HIV infection/disease

HIV infection/disease, pregnant woman or perinatally exposed infant

Influenza-associated death (all ages) Japanese encephalitis

Latent tuberculosis infection (LTBI)

Legionellosis Leptospirosis

Listeriosis Lyme disease

Lymphocytic choriomeningitis virus

Mpox (formerly known as Monkeypox) Multisystem Inflammatory Syndrome in adults (MIS-A)

Multisystem Inflammatory Syndrome in children (MIS-C)

Mumps

Pandrug-resistant Organisms

Pertussis Psittacosis

Q Fever

Rabies, postexposure prophylaxis administration

Salmonellosis, non-typhoidal Shigellosis

Spotted fever rickettsiosis, including Rocky Mountain Spotted fever

Streptococcus pneumoniae, invasive disease (including antimicrobial

susceptibility testing) Streptococcus, Group A, invasive disease

Syphilis

Tetanus

or staphylococcal)

Vancomycin-resistant Staphylococcus aureus (VRSA) and Vancomycin intermediate Staphylococcus

Varicella (chickenpox)

Yersiniosis, Non-pestis

Yellow fever

Toxic shock syndrome (streptococcal

Trichinellosis

Tuberculosis disease, cases and suspects Typhoid and paratyphoid fever, cases and carriers

aureus (VISA)

Vibriosis (non-cholera Vibrio infection)

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### **IMMEDIATELY REPORTABLE OUTBREAKS**

- 1. Any disease required to be reported as listed above
- Newborns with diarrhea in hospitals or other institutions
- 3. Foodborne or waterborne diseases in addition to those specified above
- Streptococcal illnesses
- Conjunctivitis
- 6. Impetigo
- Clusters or suspected outbreaks of any disease associated with hospitals and healthcare
- Influenza-like illness
- 9. Viral meningitis
- 10. Unusual occurrence of disease
- 11. Any disease (e.g. anthrax, plague, tularemia, Brucella species, smallpox, or botulism) or chemical illness considered a bioterrorism threat, importation, or laboratory release

### OTHER REPORTABLE NON-COMMUNICABLE CONDITIONS AND DISEASES

- Report all blood lead results (capillary and venous) in children and adults within one week (410 IAC 29-3-1)
- · Report confirmed cases of cancer occurring in residents diagnosed or treated in Indiana to the state cancer registry (410 IAC 21-1-2)

3/2/23 3/2/23

### 2023 Indiana Reportable Result/Pathogen List for Laboratories

410 IAC 1-2.5-75 & 76



### REPORT IMMEDIATELY UPON SUSPICION

Bacillus anthracis Burkholderia mallei Burkholderia pseudomallei Clostridium botulinum

Corynebacterium diphtheriae Eastern equine encephalitis virus

Francisella tularensis

Hepatitis, viral, type B, pregnant woman (acute and chronic) or perinatally exposed infant

Measles virus

Middle East Respiratory Syndrome Coronavirus (MERS-CoV)

Neisseria meninaitidis, invasive disease

Novel influenza A Poliovirus

Rabies virus

Rubella virus SARS-associated coronavirus (SARS-CoV) Smallpox (variola) virus Viral hemorrhagic fever, filoviruses

Ebola virus Marburg virus

Vibrio cholerae O1, O139, or toxigenic

Viral hemorrhagic fever, other Crimean-Congo hemorrhagic fever virus

Guanarito virus Junin virus Lassa virus

Lujo virus Machupo virus Sabia virus

Yersinia pestis

For immediate reporting call: 317-233-7125 or 317-233-1325 (after hours)

Please also report via electronic laboratory reporting.

For facilities unable to submit via ELR please fax reports to 317-234-2812.

### REPORT WITHIN ONE WORKING DAY

Anaplasma spp.

Arboviruses including, but not limited to:

Chikungunya virus Dengue virus

Jamestown Canyon virus

Japanese encephalitis virus

La Crosse (California serogroup) viruses

Powassan virus

St. Louis encephalitis virus

Western equine encephalitis virus

West Nile virus

Zika virus

Babesia spp.

Bordetella pertussis Borrelia buradorferi

Brucella spp.

Campylobacter spp.

Candida auris and unusual Candida spp. (Species other than C. albicans, C. parapsilosis, C.

krusei)

dubliniensis, C.lusitaniae, C. tropicalis, or C. Carbapenemase-producing Enterobacterales, Pseudomonas aeruginosa, and Acinetobacter

baumannii\*

Chlamydia psittaci

Chlamydia trachomatis

Lymphogranuloma venereum (LGV) (C. trachomatis serotypes L1, L2, or L3)

Clostridium tetani Coccidioides spp

Coxiella burnetii Cryptosporidium spp.

Cyclospora cayetanensis

\* Include antimicrobial susceptibility testing

† Further quidance on the second page of the Indiana Reportable Result/Pathogen List for Laboratories

Ehrlichia spp.

Escherichia coli (E. coli) infection (Shiga toxin-producing (STEC), including but not limited to, E. coli O157, E. coli O157:H7, non-O157 E. coli, and Shiga toxin

detected\*

Giardia spp.

Grimontia hollisae (Vibrio hollisae)

Haemophilus ducrevi

Haemophilus influenzae, invasive disease\*

Hantavirus

Hepatitis, viral, Type A, Anti-HAV IgM or RNA

detected

Hepatitis, viral, Type B

Hepatitis, viral, Type C

Hepatitis, viral, Type Delta

Hepatitis, viral, Type E, Anti-HEV IgM and IgG

Hepatitis, viral, unspecified Histoplasma capsulatum

HIV and related retroviruses

Influenza

Interferon gamma release assay (IGRA) for tuberculosis (positive results only)

Legionella spp.

Leptospira spp. Listeria monocytogenes

Lymphocytic choriomeningitis virus Mpox (Monkeypox) virus, including Non-

variola Orthopox virus and Orthopox virus Mumps virus

Mycobacterium leprae

Mycobacterium tuberculosis

Neisseria gonorrhoeae (list anatomic site to determine if disseminated infection)\*

Pandrug-resistant Organisms Photobacterium damselae

(Vibrio damsela)

Plasmodium spp.

Pneumocystis carinii (Pneumocystis

pneumonia) Rickettsia (non-rickettsii spp.)

Rickettsia rickettsii

Salmonella spp. (non-typhoidal)

Salmonella serotype Paratyphi

(Paratyphoid fever)\*

Salmonella serotype Typhi (Typhoid

fever)\* SARS-CoV-2

Shiqella spp.

Streptococcus, group A (Streptococcus pyogenes), invasive disease\*

Streptococcus pneumoniae, invasive disease\*

Treponema pallidum

Trichinella spiralis

Vancomycin-resistant Staphylococcus aureus (VRSA) and Vancomycin intermediate Staphylococcus aureus

(VISA)\*

Varicella-zoster virus Vibrio spp.

West African monkeypox virus Yellow fever virus

Yersinia spp., Enterocolitica, Pseudotuberculosis

3/1/23

### 2023 Indiana Reportable Result/Pathogen List for Laboratories

410 IAC 1-2.5-75 & 76



### **HEPATITIS C HEPATITIS B**

- · Positive HBsAa:
- · Positive/detectable HBV DNA (including quantitative, qualitative, and genotype testing);
- · Positive anti-HBc IgM;
- Positive HBeAg;
- · Anti-HBs (positive, negative, and indeterminate) for children ≤ 2 years of age: and
- · If any of the above results are reported, also report the following:
- Pregnancy status
- 2. Concurrent ALT and total bilirubin
- 3. Other associated positive or negative hepatitis serological results (e.g., hepatitis A, hepatitis B, hepatitis C, hepatitis D, and/or hepatitis E)
- 4. Negative HBsAg and/or negative/ undetectable HBV DNA results

- · Positive Anti-HCV (including rapid tests):
- · HCV RNA (positive/detectable and negative/undetectable results), including quantitative, qualitative, and genotype testing;
- ≤ 36 months of age; and
- If any of the above results are reported. also report the following:
- 1. Pregnancy status
- 2. Concurrent ALT and total bilirubin result
- 3. Other associated positive or negative hepatitis serological results (e.g., hepatitis A, hepatitis B, hepatitis C, hepatitis D, and/or hepatitis E)

### ONE DAY ISOLATE SUBMISSION

Laboratories shall submit all suspect biothreat isolates of the following organisms to the IDOH Laboratory for further evaluation within one (1) business day of isolation:

- 1. Bacillus anthracis
- 2. Brucella spp.
- 3. Burkholderia mallei/pseudomallei
- 4. Francisella tularensis
- Yersinia pestis

### THREE DAY ISOLATE SUBMISSION

Laboratories shall submit all isolates of the following organisms to the IDOH Laboratory for further evaluation within three (3) business days of isolation:

- Carbapenemase-producing Enterobacterales, Pseudomonas aeruginosa, and Acinetobacter baumannii
- 2. Candida auris and unusual Candida spp. (Species other than C. albicans, C. parapsilosis, C. dubliniensis, C. lusitaniae, C. tropicalis, or C. krusei)
- 3. Escherichia coli (Shiga toxin-producing E. coli (STEC)) isolates<sup>‡</sup>
- 4. Haemophilus influenzae, invasive disease
- 5. Arboviral IgM positive CSF or serum specimens, including Eastern Equine Encephalitis virus
- 6. Listeria monocytogenes
- 7. Mycobacterium tuberculosis complex (M. tuberculosis, M. bovis, M. canettii, M. africanum, M. microti)
- 8. Neisseria meningitidis, invasive disease
- Salmonella spp. isolates<sup>‡</sup>
- Shigella spp. isolates<sup>‡</sup>
- 11. Streptococcus pneumoniae, invasive disease, isolates from persons less than five (5) years of age
- 12. Vibrio cholerae isolates<sup>‡</sup>
- 13. Vibrio spp., Grimontia hollisae (Vibrio hollisae), and Photobacterium damselae (Vibrio damsela) isolates<sup>‡</sup>
- 14. Vancomycin-resistant Staphylococcus aureus (VRSA) and Vancomycin intermediate Staphylococcus aureus (VISA). Staphylococcus aureus isolated from any body site that are vancomycin intermediate level MIC = 4-8 µg/mL or vancomycin resistant level MIC >= 16 μ g/mL
- \* If isolate of organism is not available, submit clinical specimens per IAC 1-2.5-76(f) 3/1/23

- - Negative Anti-HCV results for children

### REPORTING REQUIREMENTS

- · Positive hepatitis D antibody testing; Reporting is required of any specimen
- · Positive HDV RNA (including quantitative and qualitative)

· If any of the above results are reported,

Pregnancy status

also report the following:

**HEPATITIS D** 

2. Concurrent ALT and total bilirubin result

Any infection, disease or condition submitted via electronic laboratory reporting should continue to be reported to the Indiana Department of Health. For facilities unable to submit via ELR please fax reports to 317-234-2812.

derived from the human body yielding microscopic, bacteriologic, immunologic, serologic, or other evidence of infection by any of the organisms or agents listed.

- 1. Test: Name, date, test results, specimen source, normal limits for the test, test result interpretation, and laboratory's accession number or other numeric
- identifier. 2. Person: Name, address, and date of birth (or age if date of birth is not
- available) 3. Submitter: Name, address, and telephone number of attending physician, hospital, clinic, or other specimen submitter
- 4. Laboratory: Name, address, telephone number, and CLIA ID number of the laboratory performing the test

When submitting organisms and for questions about isolate submission, Indiana Department of Health Laboratory should be notified at

317-921-5500.

# Reportable Disease List Changes - Immediately Reportable

# Diseases that are newly immediately reportable

- Influenza A, Novel (previously reportable within 24 hours)
- Melioidosis
- Middle East Respiratory Syndrome (MERS)
- Sudden Acute Respiratory Syndrome (SARS)
- Viral hemorrhagic fever, filoviruses
- Viral hemorrhagic fever, other
- The total number of immediately reportable diseases has decreased



# Reportable Disease List Changes - Within One Working Day

- All diseases previously reported within 24 hours, 72 hours, or five business days are now reportable within one working day
- Changes also include some diseases that were previously immediately reportable

# **Summary of Changes**

- Several diseases were added
- Two diseases previously reportable were modified in scope
- Arboviral diseases were re-grouped to be listed together under arboviral rather than by individual name, with the exception of Eastern Equine Encephalitis Virus (EEEV) disease
- Several diseases are no longer reportable



# **Timeline for Reporting Changes**

- The following documents will be released March 1
  - Indiana Reportable Disease List for Healthcare Providers and Hospitals
  - Indiana Reportable Result/Pathogen List for Laboratories
  - Indiana Health Alert Network message
  - Frequently asked questions document
- The changes will be effective starting April 1
- The released documents can be found at the following URL:
  - https://www.in.gov/health/erc/infectious-disease-epidemiology/infectious-disease-epidemiology/communicable-disease-reporting/



# **Expected Impacts of Reporting Changes**

- Simplified disease/pathogen reporting timeframes for healthcare providers and laboratorians
- Allows the IDOH to easily change and update reportable diseases
- Increased reporting guidance for healthcare providers and laboratorians
- No impact to reporting methods (i.e., NBS, Confidential Report of Communicable Diseases)



# **How to Report Diseases to the IDOH**

# **Immediately Reportable**

1. Phone call: 317-233-7125 317-233-1325 (after hours)

## **AND**

2. NBS Users: NBS Morbidity Report

Non-NBS Users: Faxed Communicable Disease Reporting (CDR) Form

# Within One Working Day

**NBS Users:** NBS Morbidity Report\*

Non-NBS Users: Faxed Communicable Disease Reporting (CDR) Form

