

May 2003 - Disease Reporting and Surveillance

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Federal government officials have asked public health departments and the medical community to remain vigilant and be fully prepared to respond to a bioterrorism event even though the Homeland Security Advisory System's threat level was recently lowered from orange to yellow. Timely and accurate reporting of communicable diseases by healthcare providers has always been an essential component of communicable disease surveillance, prevention and control. However, with the current global outbreak of Severe Acute Respiratory Syndrome (SARS) and the potential for bioterrorist attack, the importance of health care providers reporting unusual occurrences of illness as well as the mandated infectious diseases has intensified.

The primary goal of communicable disease surveillance is to intervene rapidly when appropriate to prevent disease transmission. Other goals include identifying the source, monitoring the extent and spread of disease, and determining when an outbreak is over.¹

The Clark County Health District (CCHD), Office of Epidemiology (OOE) has been exploring various enhanced surveillance methods including the following:

- Monitoring electronically transmitted patient data from a local hospital/clinic system for increases in certain illnesses or syndromes.
- Monitoring 911 dispatch data.
- Receiving electronically transmitted laboratory data.
- Developing a web-based system to allow reporting and information exchange with health care providers via the internet.

The OOE also conducts sentinel site syndromic surveillance. Several local sites have agreed to report on a weekly basis the number of patient visits attributed to influenza-like illness, gastroenteritis, or both. Through sentinel site

surveillance the OOE is able to monitor disease patterns and subsequently provide the information to the local medical community. Health care providers interested in participating in a surveillance program may do so by contacting the OOE for more information.

Nevada Revised Statutes mandate reporting of unusual occurrences of disease as well as specific reportable illnesses. The recent changes to Health Insurance Portability and Accountability Act (HIPAA) do not affect this requirement. HIPAA contains provisions for the reporting of private information to public health authorities. Title 45 CFR 160.204(b) states that the authority of public health surveillance, investigation or intervention should not be limited in any way. Additionally, personal health information can be shared with public health authorities without requiring any waivers, or consent from the patient. §164.512(b) (1) (i) states that information can be disclosed, without a waiver, to:

A public health authority that is authorized by law to collect or receive such information for the purpose of preventing or controlling disease, injury, or disability, including, but not limited to, the reporting of disease, injury, vital events such as birth or death, and the conduct of public health surveillance, public health investigations, and public health interventions;

Enhanced surveillance methods cannot replace the essential role that health care providers play in detecting unusual occurrences of illness or communicable disease outbreaks. Timely reporting enables the OOE to respond promptly to investigate and intervene when necessary. The Health Alert Network (an e-mail/fax broadcast system) is used by the Health District to keep the medical community informed of disease outbreaks or unusual illness occurrences.

Physicians can access surveillance reports, newsletters and monthly disease statistics at http://www.cchd.org/physician/physician_only.htm.

Additional information that can be found on the website includes the list of reportable diseases and bioterrorism preparedness information.

Health care providers are reminded that failure to report mandated communicable diseases is a gross misdemeanor and may be subject to an administrative fine of \$1,000 for each violation. Please report all cases of communicable disease or

unusual illness to the CCHD OOE at (702) 383-1378. An epidemiologist is available at this number 24 hours a day.

1. Hoffman, Richard E.. Preparing for a Bioterrorist Attack: Legal and Administrative Strategies. Emerging Infectious Diseases Volume 9, Number 2, page 243, 2003

**When You See Unusual,
THINK OUTBREAK!
24-hour phone: (702) 383-1378**

**CLARK COUNTY HEALTH DISTRICT
COMMUNICABLE DISEASE REPORT – FIRST QUARTER 2003**

DISEASE	YTD 2002	YTD 2003
VACCINE PREVENTABLE DISEASES		
HAEMOPHILUS INFLUENZA (invasive)	3	2
HEPATITIS A	10	4
HEPATITIS B	7	17
INFLUENZA	51	28
PERTUSSIS	0	1
SEXUALLY TRANSMITTED DISEASES		
AIDS	54	55
CHLAMYDIA	1110	1147
GONORRHEA	391	412
HIV	29	59
SYPHILIS (Primary & Secondary)	1	1
SYPHILIS (Early Latent)	4	10
ENTERICS		
AMEBIASIS	6	7
BOTULISM INTESTINAL (INFANT)	0	1
CAMPYLOBACTERIOSIS	20	21
CRYPTOSPORIDIOSIS	2	2
E-COLI O157:H7	1	0
GIARDIASIS	26	21
ROTAVIRUS	190	245
SALMONELLA	40	16
SHIGELLOSIS	0	6
OTHER DISEASES		
COCCIDIOIDOMYCOSIS	6	9
ENCEPHALITIS	1	0
LEGIONELLOSIS	0	1
LYME DISEASE	0	1
MALARIA	1	0
MENINGITIS, ASEPTIC/VIRAL	18	13
MENINGITIS, BACTERIAL	9	10
MENINGOCOCCAL DISEASE	8	2
RESPIRATORY SYNCYTIAL VIRUS (RSV)	1453	1127
TUBERCULOSIS	8	21