

PUBLIC HEALTH REPORTING FOR CLINICIANS

Oregon Public Health Division

By law,¹ Oregon clinicians must report diagnoses of the specified infections, diseases, and conditions. Both lab-confirmed and clinically suspect cases are reportable. The parallel system of lab reporting does not obviate the clinician's obligation to report. Some conditions (e.g., Uncommon Illnesses of Public Health Significance, animal bites, HUS, PID, pesticide poisoning, disease outbreaks) are rarely if ever identified by labs. In short, we depend upon clinicians to report.

Reports should be made to the patient's local health department² and should include at least the patient's name, home address, phone number, date of birth, sex, the diagnosis, and the date of symptom onset. Most reports should be made within one working day of the diagnosis, but there are several important exceptions.

Disease reporting enables appropriate public health follow-up for your patients, helps identify outbreaks, provides a better understanding of morbidity patterns, and may even save lives. Remember that HIPAA does not prohibit you from reporting protected health information to public health authorities for the purpose of preventing or controlling disease, including public health surveillance and investigations; see 45 CFR 164.512(b)(1)(i).

CONTACT YOUR LOCAL HEALTH DEPARTMENT

For a list of local health department phone numbers go to:
www.oregon.gov/DHS/ph/acd/reporting/counties.shtml

IMMEDIATELY

Anthrax
Botulism
Diphtheria
Marine intoxications³
Plague
SARS-coronavirus
Any outbreak of disease⁴
Any uncommon illness of potential public health significance⁵

WITHIN 24 HOURS

Haemophilus influenzae
Measles (rubeola)
Meningococcal disease
Pesticide poisoning
Polio
Rabies
Rubella
Vibrio infection

WITHIN ONE WORKING DAY

Animal bites
Any arthropod-borne infection⁶
Brucellosis
Campylobacteriosis
Chancroid
Chlamydia infection⁷
Creutzfeldt-Jakob disease (CJD) and other prion illnesses
Cryptosporidiosis
Cyclospora infection
Escherichia coli (Shiga-toxigenic)⁸
Giardiasis
Gonorrhea
Hantavirus infection
Hepatitis A
Hepatitis B
Hepatitis C
Hepatitis D (delta)
HIV infection and AIDS
Hemolytic-uremic syndrome (HUS)
Legionellosis
Leptospirosis
Listeriosis
Lyme disease

Lymphogranuloma venereum (LGV)
Malaria
Mumps
Pelvic inflammatory disease (acute, non-gonococcal)
Pertussis
Psittacosis
Q fever
Rocky Mountain spotted fever
Salmonellosis (including typhoid)
Shigellosis
Syphilis
Taenia solium infection/Cysticercosis
Tetanus
Trichinosis
Tuberculosis
Tularemia
West Nile virus
Yersiniosis

WITHIN ONE WEEK

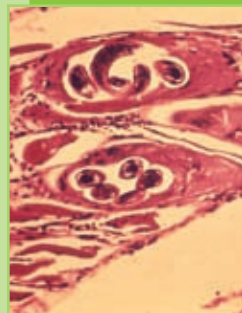
Lead poisoning
Diabetes in a person ≤ 18 years old⁹

FOOTNOTES

- 1 ORS 433.004; OAR 333-018-0000 to 333-018-0015.
- 2 Refer to www.oregon.gov/DHS/ph/acd/reporting/disrpt.shtml for a list of local health departments and more details about what to report.
- 3 Paralytic shellfish poisoning, scombroid, domoic acid intoxication, ciguatera, etc.
- 4 Outbreaks are ≥ 2 cases from separate households associated with a suspected common source.
- 5 We can't list every exotic disease in the world. Ask yourself "Might there be public health implications from a case of possible Ebola, smallpox, melioidosis, or whatever?" If the answer is "yes"—or even "maybe"—then pick up the phone. There are no penalties for overreporting.
- 6 Including any viral, bacterial, and parasitic infections typically spread by ticks, mosquitos, fleas and their ilk (e.g. relapsing fever, typhus, babesiosis, dengue, filariasis, Colorado tick fever, ehrlichiosis, yellow fever, Chagas disease, leishmaniasis, SLE, WEE, EEE, CCHF, etc.)
- 7 STDs, trachoma, TWAR, psittacosis—all of 'em—even if they're renamed *Chlamydophila*.
- 8 *E. coli* O157:H7 is the exemplar of this group.
- 9 Fax all childhood diabetes cases to 971-673-0994 (Forms available at www.healthoregon.org/diabetes).



Oregon Department of Human Services
Office of Disease Prevention and Epidemiology
971-673-1111 (phone) • 971-673-1100 (fax)
www.oshd.org/acd



Trichinella spiralis in muscle tissue



Most reptiles carry and excrete *Salmonella*



Mediastinal widening from inhalational anthrax



Smallpox—eradicated?



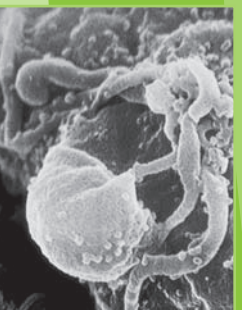
Big brown bats (*Eptesicus fuscus*) can carry rabies



Child with pertussis



A potential source of several enteric pathogens



HIV-1 budding from cultured lymphocyte