

2016 Reportable Disease Changes

2016 Changes to Michigan's Reportable Diseases

SUMMARY DISTRIBUTED ON JANUARY 20

2016 Reportable Diseases – by Pathogen or by Condition

Available at:

www.michigan.gov/cdinfo

2016 REPORTABLE DISEASES IN MICHIGAN – BY CONDITION

A Guide for Physicians, Health Care Providers and Laboratories

Report the following conditions to the Michigan Disease Surveillance System (MDSS) or local health department (see reverse) within 24 hours (unless otherwise noted) if the agent is identified by clinical or laboratory diagnosis.

Report the unusual occurrence, outbreak or epidemic of any disease or condition, including healthcare-associated infections.

Anaplasmosis (Anaplasma phagocytophilum)
 Anthrax (Bacillus anthracis) (4)
 Arboviral encephalitis, arthropod-borne and non-neuroinvasive:
 Chikungunya, Eastern Equine, Jamestown Canyon, La Crosse, Powassan, St. Louis, Western Equine, West Nile
 Babesiosis (Babesia microti)
 Blaemomycosis (Blaetomyces dermatis)
 Botulism (Clostridium botulinum) (4)
 Brucellosis (Brucella species) (4)
 Campylobacteriosis (Campylobacter species)
 Chancroid (Haemophilus ducreyi)
 Chickenpox / Varicella (Varicella virus) (6)
 Chlamydial infections (including trachoma, genital infections, LGV (Chlamydia trachomatis)) (3)(6)
 Cholera (Vibrio cholera) (4)
 Coccidioidomycosis (Coccidioides immitis)
 Cryptosporidiosis (Cryptosporidium species)
 Cyclosporiasis (Cyclospora species)
 Dengue Fever (Dengue virus)
 Diphtheria (Corynebacterium diphtheriae) (5)
 Ehrlichiosis (Ehrlichia species)
 Encephalitis, viral or unspecified
 Escherichia coli O157:H7 and all other Shiga toxin positive serotypes
 Giardiasis (Giardia species)
 Glanders (Burkholderia mallei) (4)
 Gonorrhoea (Neisseria gonorrhoeae) (3)(6)
 Guillain-Barré syndrome (1)
 Haemophilus influenzae, sterile sites only; submit isolates for serotyping for patients <35 years of age (5)
 Hantavirus
 Hemolytic Uremic Syndrome (HUS)
 Hemorrhagic Fever Viruses (4)
 Hepatitis, viral:
 Hepatitis A virus (Anti-HAV IgM)
 Hepatitis B virus (HBsAg, anti-HBc IgM, HBV NAAT, HBV genotype; report all HBsAg and anti-HBs (positive, negative, indeterminate) for children 5 years of age by 2017) (6)
 Hepatitis C virus (Anti-HCV, HCV NAAT, HCV genotype) (6)
 Hepatitis D virus (HDsAg and HDV IgM)
 Hepatitis E virus (Anti-HEV IgM)
 Histoplasmosis (Histoplasma capsulatum)
 HIV (tests including reactive immunoassays (e.g., WB, EIA, IA), detection tests (e.g., VL, NAT, p24 genotype), CD4 counts/percent, and all tests related to perinatal exposures) (2)(5)(6)
 Influenza virus (weakly aggregate counts)
 Pediatric mortality, report individual cases (5)(6)
 Novel influenza virus, report individual cases (5)(6)
 Kawasaki Disease (1)
 Legionellosis (Legionella species) (5)
 Leprosy or Hansen's Disease (Mycobacterium leprae)
 Leptospirosis (Leptospira species)
 Listeriosis (Listeria monocytogenes) (5)(6)
 Lyme Disease (Borrelia burgdorferi)
 Malaria (Plasmodium species)

Measles (Measles/Rubella virus)
 Melioidosis (Bacillus pseudomallei) (4)
 Meningitis: bacterial, viral, fungal, and parasitic
 Meningococcal Disease (Neisseria meningitidis, sterile sites) (5)
 Middle East Respiratory Syndrome (MERS-CoV) (5)
 Mumps (Mumps virus)
 Orthopox viruses (including Smallpox, Monkeypox) (4)
 Pertussis (Bordetella pertussis)
 Plague (Yersinia pestis) (4)
 Polio (Poliovirus)
 Prion disease (including CJD)
 Psittacosis (Chlamydoiphila psittaci)
 Q Fever (Coxiella burnetii) (4)
 Rabies (Rabies virus)
 Rheumatic fever (1)
 Rubella (Rubella virus) (6)
 Salmonellosis (Salmonella species) (5)
 Severe Acute Respiratory Syndrome (SARS) (5)
 Shigellosis (Shigella species) (5)
 Spotted Fever and Typhus Group (Rickettsia species)
 Staphylococcus aureus (MRSA), outbreaks only
 Staphylococcus aureus (MRSA), vancomycin intermediate/ resistant (VISA) (4)(5)
 Streptococcal pneumoniae, sterile sites
 Streptococcus pyogenes, group A, sterile sites, including Streptococcal Toxic Shock Syndrome (STSS)
 Syphilis (Treponema pallidum) (6)
 Tetanus (Clostridium tetani)
 Toxic Shock Syndrome (non-streptococcal) (1)
 Trichinellosis (Trichinelliaspiralis)
 Tuberculosis (Mycobacterium tuberculosis complex); report all preliminary and final TB NAAT, TB genetic probe, chromatographic or other rapid test results (5)
 Tularemia (Francisella tularensis) (4)
 Typhoid Fever (Salmonella typhi) (5)
 Vibriosis (Non-vibrio species) (5)
 Yellow Fever (Yellow Fever virus)
 Yersiniosis (Yersinia enterocolitica)

LEGEND

(1) Reporting within 3 days is required.
 (2) Reporting within 7 days is required.
 (3) Sexually transmitted infections for which expedited partner therapy is authorized. See www.michigan.gov/hivstd for details.
 (4) A laboratory shall immediately submit suspect or confirmed isolates, subcultures, or specimens from the patient being tested to the MDHHS Lansing laboratory.
 (5) Isolate requested. If not available from non-culture based testing, the positive broth and/or stool in transport medium must be submitted to the MDHHS Lansing laboratory.
 (6) Report pregnancy status, if available.
 Blue Bold Text = Category A bioterrorism agent, notify the MDHHS Laboratory immediately: (517) 335-8063

This reporting is expressly allowed under HIPAA and required by Michigan Public Act 368 of 1978, 333.511.
 MDHHS maintains, reviews, and revises this list at least annually. For the most recent version, please refer to: www.michigan.gov/cdinfo
 Michigan Department of Health and Human Services • Bureau of Laboratories • Bureau of Disease Control, Prevention, and Epidemiology

REV.01/16

2016 REPORTABLE DISEASES IN MICHIGAN – BY PATHOGEN

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 Arboviral encephalitis, neuro- and non-neuroinvasive:
 Chikungunya, Eastern Equine, Jamestown Canyon, La Crosse, Powassan, St. Louis, Western Equine, West Nile
 Babesia microti (Babesiosis)
 Bacillus anthracis (Anthrax) (4)
 Blastomycosis (Blastomyces dermatitidis)
 Bordetella pertussis (Pertussis)
 Borrelia burgdorferi (Lyme Disease)
 Brucella species (Brucellosis) (4)
 Burkholderia mallei (Glanders) (4)
 Burkholderia pseudomallei (Melioidosis) (4)
 Campylobacter species (Campylobacteriosis)
 Chlamydia trachomatis (Trachoma, Genital infections, LGV) (3)(6)
 Chlamydia pneumoniae (Pneumonia)
 Chlamydia psittaci (Psittacosis) (4)
 Clostridium tetani (Tetanus)
 Coccidioides immitis (Coccidioidomycosis)
 Coronavirus (SARS, MERS-CoV) (5)
 Corynebacterium diphtheriae (Diphtheria) (5)
 CoxIELLA burnetii (Q Fever)
 Cryptosporidium species (Cryptosporidiosis)
 Cyclospora species (Cyclosporiasis)
 Dengue Fever (Dengue Fever)
 Ehrlichia species (Ehrlichiosis)
 Encephalitis, viral or unspecified
 Escherichia coli, O157:H7 and all other Shiga toxin positive serotypes (including HUS) (6)
 Francisella tularensis (Tularemia) (4)
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 Guillain-Barré syndrome (1)
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 Haemophilus influenzae, sterile sites only; submit isolates for serotyping for patients <35 years of age (5)
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 Hepatitis A virus (Anti-HAV IgM)
 Hepatitis B virus (HBsAg, anti-HBc IgM, HBV NAAT, HBV genotype; report all HBsAg and anti-HBs (positive, negative, indeterminate) for children 5 years of age by 2017) (6)
 Hepatitis C virus (Anti-HCV, HCV RNA nucleic acid tests (PCR), HCV genotype) (6)
 Hepatitis D virus (HDsAg, anti-HDc IgM)
 Hepatitis E virus (Anti-HEV IgM)
 Histoplasma capsulatum (Histoplasmosis)
 HIV (tests including: reactive immunoassays (e.g., WB, EIA, IA), detection tests (e.g., VL, NAT, p24 genotype), CD4 counts/ percent, and all tests related to perinatal exposures) (2)(5)(6)
 Influenza virus (weakly aggregate counts)
 Novel influenza virus, report individual cases (5)(6)
 Kawasaki Disease (1)
 Legionella species (Legionellosis) (5)

LEGEND

(1) Reporting within 3 days is required.
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 (4) A laboratory shall immediately submit suspect or confirmed isolates, subcultures, or specimens from the patient being tested to the MDHHS Lansing laboratory.
 (5) Isolate requested. If not available from non-culture based testing, the positive broth and/or stool in transport medium must be submitted to the MDHHS Lansing laboratory.
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2016 Michigan Changes

- Removed Amebiasis (not currently nationally notifiable)
- Arboviral condition “California Group” specified as Jamestown Canyon & La Crosse viruses
- Separated Coronavirus infection into SARS and MERS (on ‘By Condition’ list)
- Moved HUS to E. Coli section (on ‘By Pathogen’ list)
- Hepatitis B - added HBsAg and anti-HBs (positive, negative, indeterminate) for children 5 years of age and younger

2016 Michigan Changes

- Updated HIV lab information
- Changed “Toxic Shock Syndrome (non-streptococcal)” to “*Staphylococcus aureus* Toxic Shock Syndrome” (on ‘By Pathogen’ list)
- Changed “Viral Hemorrhagic Fever” to “Hemorrhagic Fever Viruses”
- Added pregnancy status reporting requirement for:
 - Chlamydia, STEC, Hepatitis B, Hepatitis C, HIV, Novel Influenza, Listeriosis, Gonorrhea, Rubella, Syphilis, Chickenpox

2016 Michigan Changes

- Clarified Mycobacterium tuberculosis lab information: “report all **preliminary and final** TB NAAT, TB genetic probe, chromatographic or other rapid test results”
- Clarified language for the lab submission: “A laboratory shall **immediately submit suspect or confirmed** isolates, subcultures, or specimens from the patient being tested to the MDHHS Lansing Laboratory”
- Anthrax, Brucellosis, Glanders, Melioidosis, Botulism, Tularemia, Hemorrhagic Fever Viruses, Orthopox viruses (Smallpox, Monkeypox), VRSA, Cholera, and Plague

2016 Michigan Changes

- Clarified language for lab submission: “Isolate requested. If not available from non-culture based testing, the positive broth and/or stool in transport medium must be submitted to the MDHHS Laboratory”
- Coronovirus (SARS, MERS-CoV), Diphtheria, E. coli O157:H7, Haemophilus influenza for patients <15 years, HIV, Legionellosis, Listeriosis, TB, Meningococcal Diseases, Novel Influenza, Salmonellosis, Typhoid Fever, Shigellosis, VISA, Cholera, Vibriosis (non-Cholera)

2016 Health Care Professional's Guide to Disease Reporting in Michigan (Brick Book)



2016 Brick Book Changes

- Changes to reportable disease list reflected in Brick Book lists and language
- Re-organized sections (though individual sections remain unchanged)
 - How to Report – MDSS (p5)
 - Expedited Partner Services (p9-10)
 - Immunizations (p10-11)
 - Submission of Post-mortem Autopsy Specimen (p18)
- Added ‘preschools’ to list of facilities that are required to report communicable diseases (p4)
- Clarified language in the “Submission of HIV laboratory specimens” section (p15)

2016 Brick Book Changes

- Added “Viral hepatitis reporting” to clarify new requirements for reporting (p16)
- Updated bibliographic information
- Updated directory of local health departments

8. Viral hepatitis reporting

Note: Every new positive/reactive result should be reported, regardless of whether the patient was previously reported.

Laboratories and physicians are required to report all positive/reactive results for hepatitis viruses to the appropriate local health department within 24 hours for the following:

Hepatitis A virus (HAV)

- IgM antibodies to HAV (Anti-HAV IgM)

Hepatitis B virus (HBV)

- Hepatitis B Surface Antigen (HBsAg)
- Hepatitis B e antigen (HBeAg)
- IgM antibodies to Hepatitis B Core Antigen (Anti-HBc IgM)
- HBV Nucleic Acid Tests
 - Quantitative HBV DNA (viral load)
 - Qualitative HBV DNA
 - HBV genotype
- ***Report pregnancy status***, if available
- Report HBsAg and anti-HBs (POSITIVE, NEGATIVE AND INDETERMINATE) results for ***children 5 years of age and younger***, by 2017 or prior if available.

Hepatitis C virus (HCV)

- Hepatitis C Virus Antibody Tests (anti-HCV) – all reactive results, regardless of the signal-to-cutoff-ratio. This includes rapid or point-of-care HCV antibody tests.
- Hepatitis Nucleic Acid Tests
 - HCV Quantitative RNA results (viral load)
 - HCV Qualitative RNA results
 - HCV genotype
- ***Report pregnancy status***, if available

Hepatitis D virus (HDV)

- Hepatitis D surface antigen (HDsAg)
- IgM antibodies to HDV (anti-HDV IgM)

Hepatitis E virus (HEV)

- IgM antibodies to HEV (Anti-HEV IgM)

2016 National Notifiable Diseases Changes

WWW.CDC.GOV/NNDSS

2016 National Changes

Hepatitis C

➤ For Acute:

- Remove requirement for negative HAV or HBV IgM results
- Remove requirement for HCV Antibody signal to cut off ratio
- Seroconversion changed from 6 months to 12 months
- Lower ALT threshold from 400 to 200

➤ For Chronic:

- Remove requirement of ALTs for Probable, Chronic
- Remove requirement for HCV Antibody signal to cut off ratio

New Conditions Under National Surveillance

Chikungunya virus neuroinvasive and non-neuroinvasive disease

- To be added pending approval
- **Note:** the case definition for Arboviral neuroinvasive and non-neurinvasive diseases will be revised to include Chikungunya virus to the list of nationally notifiable Arboviral diseases in the US
- Case definition link:
 - <http://www.cdc.gov/nndss/conditions/chikungunya-virus-disease/>

New Conditions Under National Surveillance

Hantavirus infection, non-Hantavirus Pulmonary Syndrome

- To be added pending approval
- Surveillance is broadened to include both “Hantavirus Infection, Non-Hantavirus Pulmonary Syndrome and HPS so that all cases of laboratory-confirmed hantavirus infection would be nationally notifiable
- Case definition Link:
 - <http://www.cdc.gov/nndss/conditions/hantavirus-infection-non-hantavirus-pulmonary-syndrome/case-definition/2015/>

New Conditions Under National Surveillance

Dengue-like illness

- To be added pending approval
- Clinical Description: Dengue-like illness is defined by fever as reported by the patient or healthcare provider
- Case Definition:
 - <http://wwwn.cdc.gov/nndss/conditions/dengue-virus-infections/case-definition/2015/>

2016 National Changes

- Change in display of Arboviral Disease data in MMWR NNDSS Table 1
- Remove “California serogroup viruses” and replace it with “La Crosse virus” and “Jamestown Canyon virus,” the two most commonly reported California serogroup viruses.