

PH 8-2009 (Temp)

Secretary of State
Certificate and Order for Filing
TEMPORARY ADMINISTRATIVE RULES
A Statement of Need and Justification accompanies this form.

I certify that the attached copies* are true, full and correct copies of the TEMPORARY Rule(s) adopted on UPON FILING by the
Date prior to or same as filing date

Department of Human Services, Public Health Division 333
Agency and Division Administrative Rules Chapter Number

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Rules Coordinator Address Telephone

to become effective [**September 1, 2009**] through [**February 26, 2010**].
Date upon filing or later A maximum of 180 days including the effective date.

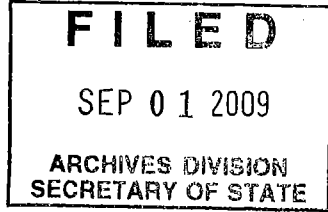
RULE CAPTION
New disease reporting requirements for pandemic influenza A (H1N1)

Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.

RULEMAKING ACTION
List each rule number separately, 000-000-0000.
Secure approval of new rule numbers (Adopted rules) with the Administrative Rules Unit prior to filing

ADOPT:

AMEND: 333-018-0015



SUSPEND:

Stat. Auth.: ORS 433.004, 433.006

Other Auth.:

Stats. Implemented: ORS 431.110, 432.060, 433.001, 433.004, 433.006, 433.012, 433.110, 433.019, 433.130, 437.010 - 437.990, 616.745, 624.080

RULE SUMMARY

The Department of Human Services, Public Health Division is temporarily amending Oregon Administrative Rule 333-018-0015 related to disease reporting to specifically require the reporting, by reportable disease reporters, laboratory-confirmed influenza resulting in or associated with hospitalization or death.

This temporary amendment is needed because the state is in the midst of an epidemic concerning pandemic influenza, and in order to have the information necessary to investigate and control the disease, the Public Health Division must have accurate numbers of individuals diagnosed with the disease.

Melvin Kohn Melvin Kohn, MD MPH 8/26/09
Authorized Signer Printed name Date

*With this original and Statement of Need, file one photocopy of certificate, one paper copy of rules listed in Rulemaking Actions, and electronic copy of rules. ARC 940-2005

STATEMENT OF NEED AND JUSTIFICATION

A Certificate and Order for Filing Temporary Administrative Rules accompanies this form.

Department of Human Services, Public Health Division

333

Agency and Division

Administrative Rules Chapter Number

In the Matter of: Amending OAR 333-018-0015 related to disease reporting

Rule Caption: New disease reporting requirements for pandemic influenza A (H1N1)

Statutory Authority: ORS 433.004, 433.006

Other Authority:

Stats. Implemented: ORS 431.110, 432.060, 433.001, 433.004, 433.006, 433.012, 433.110, 433.019, 433.130, 437.010 – 437.990, 616.745, 624.080

Need for the Temporary Rule(s):

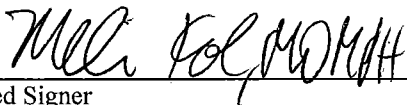
The Department of Human Services, Public Health Division is temporarily amending Oregon Administrative Rule 333-018-0015 related to disease reporting to specifically require the reporting, by reportable disease reporters, laboratory-confirmed influenza resulting in or associated with hospitalization or death.

This temporary amendment is needed because the state is in the midst of an epidemic concerning pandemic influenza, and in order to have the information necessary to investigate and control the disease, the Public Health Division must have accurate numbers of individuals diagnosed with the disease.

Documents Relied Upon, and where they are available: ORS chapter 433 <http://www.leg.state.or.us/ors/433.html>

Justification of Temporary Rule(s):

The Department finds that failure to act promptly will result in serious prejudice to the public interest, the Department, and Oregonians. This rule needs to be adopted promptly so that the state Public Health Division has the information necessary to investigate and control the disease, by having accurate numbers of individuals diagnosed with laboratory-confirmed influenza.



Authorized Signer

Melvin Kohn, MD MPH

Printed name

8/26/09

Date

OREGON ADMINISTRATIVE RULES
DEPARTMENT OF HUMAN SERVICES, PUBLIC HEALTH DIVISION
CHAPTER 333

DIVISION 18

DISEASE REPORTING

333-018-0015

What Is to Be Reported and When

(1) Health care providers shall report all cases or suspected cases of the diseases, infections, microorganisms, and conditions specified below. The timing of health care provider reports is specified to reflect the severity of the illness or condition and the potential value of rapid intervention by public health agencies.

(2) When local public health authorities cannot be reached within the specified time limits, reports shall be made directly to DHS, which shall maintain an around-the-clock public health consultation service.

(3) Licensed laboratories shall report all test results indicative of and specific for the diseases, infections, microorganisms, and conditions specified below. Such tests include but are not limited to: microbiological culture, isolation, or identification; assays for specific antibodies; and identification of specific antigens, toxins, or nucleic acid sequences.

(4) Reportable diseases, infections, microorganisms, and conditions, and the time frames within which they must be reported are as follows:

(a) Immediately, day or night: *Bacillus anthracis* (anthrax); *Clostridium botulinum* (botulism); *Corynebacterium diphtheriae* (diphtheria); *Severe Acute Respiratory Syndrome* (SARS) and infection by SARS-coronavirus; *Yersinia pestis* (plague); intoxication caused by marine microorganisms or their byproducts (for example, paralytic shellfish poisoning, domoic acid intoxication, ciguatera, scombroid); any known or suspected common-source outbreaks; any uncommon illness of potential public health significance.

(b) Within 24 hours (including weekends and holidays): *Haemophilus influenzae* (any invasive disease; for laboratories, any isolation or identification from a normally sterile site); measles (rubeola); *Neisseria meningitidis* (any invasive disease; for laboratories, any isolation or identification from a normally sterile site); pesticide poisoning; poliomyelitis; rabies (human or animal); rubella; and *Vibrio* (all species).

(c) Within one local public health authority working day: *Bordetella pertussis* (pertussis); *Borrelia* (relapsing fever, Lyme disease); *Brucella* (brucellosis); *Campylobacter* (campylobacteriosis); *Chlamyphila* (*Chlamydia*) *psittaci* (psittacosis); *Chlamydia trachomatis* (chlamydiosis; lymphogranuloma venereum); *Clostridium tetani* (tetanus); *Coxiella burnetii* (Q fever); Creutzfeldt-Jakob disease and other transmissible spongiform encephalopathies; *Cryptosporidium* (cryptosporidiosis); *Cyclospora cayetanensis* (cyclosporiasis); *Escherichia coli* (Shiga-toxigenic, including *E. coli* O157 and other serogroups); *Francisella tularensis* (tularemia); *Giardia* (giardiasis); *Haemophilus ducreyi* (chancroid); *hantavirus*; hepatitis A; *hepatitis B* (acute or chronic infection); *hepatitis C*; *hepatitis D* (delta); *HIV infection* (does not apply to anonymous testing) and

AIDS; laboratory-confirmed influenza resulting in or associated with hospitalization or death; *Legionella* (legionellosis); *Leptospira* (leptospirosis); *Listeria monocytogenes* (listeriosis); *mumps*; *Mycobacterium tuberculosis* and *M. bovis* (tuberculosis); *Neisseria gonorrhoeae* (gonococcal infections); *pelvic inflammatory disease* (acute, non-gonococcal); *Plasmodium* (malaria); *Rickettsia* (all species: Rocky Mountain spotted fever, typhus, others); *Salmonella* (salmonellosis, including typhoid); *Shigella* (shigellosis); *Taenia solium* (including cysticercosis and undifferentiated *Taenia* infections); *Treponema pallidum* (syphilis); *Trichinella* (trichinosis); *Yersinia* (other than pestis); any infection that is typically arthropod vector-borne (for example: Western equine encephalitis, Eastern equine encephalitis, St. Louis encephalitis, dengue, West Nile fever, yellow fever, California encephalitis, ehrlichiosis, babesiosis, Kyasanur Forest disease, Colorado tick fever, etc.); human bites by any other mammal; and hemolytic uremic syndrome.

(d) Within seven days: suspected lead poisoning (for laboratories; this includes all blood lead tests performed on persons with suspected lead poisoning).

(5) Licensed laboratories shall report, within seven days, the results of all tests of CD4+ T-lymphocyte absolute counts and the percent of total lymphocytes that are CD4 positive, and HIV nucleic acid (viral load) tests.

Stat. Auth.: ORS 433.004, 433.006

Stats. Implemented: ORS 431.110, 432.060, 433.001, 433.004, 433.006, 433.012, 433.110, 433.019, 433.130, 437.010-437.990, 616.745, 624.080