

To report a case please contact:

Colorado Department of Public Health & Environment

4300 Cherry Creek Drive South

Denver, CO 80246 Phone: 303-692-2700

Toll Free Phone: 1-800-866-2759 Confidential Fax: 303-782-0338 Toll Free Fax: 1-800-811-7263

Evening/weekend hours: 303-370-9395

Isolates/clinical material should be sent to:

8100 Lowry Blvd. Denver, CO 80000

Phone: 303-692-3090

Effective: October 15, 2014

COLORADO BOARD OF HEALTH CONDITIONS REPORTABLE BY ALL LABORATORIES COLLECTING SPECIMENS OR PERFORMING TESTS IN COLORADO

The list below applies to laboratories. Physicians and hospitals have separate reporting requirements. A case must be reported to the state or local health department following diagnosis within the timeframe indicated. (Infection in Colorado residents diagnosed out-of-state should also be reported.)

24-Hour Reportables

Any result diagnostic of or highly correlated with clinical illness for the following organisms:

Bacillus anthracis (Anthrax) Bordetella pertussis (Pertussis) Clostridium botulinum (Botulism) Corynebacterium diphtheriae (Diphtheria)

Haemophilus influenzae*

Hepatitis A (anti-HAV IGM only)

* (+) culture from a normally sterile site

Measles (Rubeola) (acute infection) Mycobacterium tuberculosis (Tuberculosis) (Including + AFB sputum smears) Neisseria meningitidis* (Meningococcal

Disease) or Gram-negative diplococci Polio virus (Poliomyelitis)

Rabies

Rubella (acute infection)

Salmonella Typhi (Typhoid fever)

Severe Acute Respiratory Syndrome (SARS)

Smallpox

Treponema pallidum (Syphilis) Vibrio cholerae (Cholera) Yersinia pestis (Plague)

7-Day Reportables

Any result diagnostic of or highly correlated with clinical illness for the following organisms:

Borrelia burgdorferi (Lyme Disease) Borrelia species (Tick-borne Relapsing

Fever)

Brucella species

California serogroup virus (La Crosse, etc.)

Campylobacter species

Carbapenem non-susceptible (or

carbapenemase +)E.coli, Klebsiella species and Enterobacter species (CRE)

CD4 count <500/mm³ or CD4%<29%

Chikungunya virus

Chlamydiophilia psittaci (Psittacosis) Chlamydia trachomatis (Chlamydia)

Colorado Tick Fever Coxiella burnetii (Q Fever) Cryptosporidium species Cyclospora species

Dengue Fever

Eastern Equine encephalitis virus Escherichia coli O157:H7 & Shiga Toxin-Producing E.coli Francisella tularensis (Tularemia)

Giardia lamblia

Haemophilus ducreyi (Chancroid)

Hantavirus

Hepatitis B virus (+HBsAg, +IgM anti-HBc,

+HBeAg, or +HBV DNA)

Hepatitis C virus (+ serum antibody titer, including signal to cut-off ratio, or more

specific + tests)

Human immunodeficiency virus (HIV) ** Jamestown Canyon virus

Legionella species Listeria monocytogenes Mumps

Neisseria gonorrhoeae (Gonorrhea) Plasmodium species (Malaria)

Powassan virus

Rickettsia species (Rocky Mountain Spotted

Fever, Typhus) Salmonella species Shigella species

Streptococcus pneumoniae (+ culture

from a normally sterile site) St. Louis encephalitis

Vancomycin-resistant Staphylococcus aureus (any site)

Varicella (Chicken Pox)

Vibrios, non-cholera Western equine encephalitis virus West Nile virus (acute infection)

Reportable in Denver Metropolitan Area Counties Only (Adams, Arapahoe, Denver, Douglas & Jefferson)

Carbapenem non-susceptible Acinetobacter baumannii (CRAB) (positive culture from normal sterile site or urine) (30d)

Clostridium difficile (any positive test) (30d)

Group A streptococci (positive culture from a normally sterile site) (7d)

Group B streptococci (positive culture from a normally sterile site) (7d)

Methicillin resistant Staphylococcus aureus (MRSA) (positive culture from a normally sterile site) (30d) Yersinia non-pestis (includes the above counties with the addition of Boulder & Broomfield counties) (7d)

Environmental, Occupational and Chronic Conditions

If age >18 yrs: blood lead level >25ug/dL (30d) If age ≤ 18 yrs, all blood lead levels (7d if > 10ug/dL, otherwise 30d)

Blood mercury >0.5 ug/dL and Urine mercury >20ug/L (30d) Chromosomal abnormalities and neural tube defects diagnosed by prenatal testing or by genetic testing in Colorado residents through the 3rd birthday (90d)

Immediate reporting by phone is required of any illness suspected to be caused by Biological, Chemical, or Radiologic Terrorism

All reports should include:

- 1. Name of disease or condition
- 2. Patient's name
- 3. Patient's date of birth, sex, race, ethnicity
- 4. Patient's home address and phone
- 5. Physician's name, address and phone
- 6. Lab info test name, collection date and specimen type

Disease Report Forms can be downloaded from:

https://www.colorado.gov/cdphe/report-a-disease

Please fax completed Disease Report Form to 303-782-0338.

To sign up for web-based reporting using

Colorado Electronic Disease Reporting System (CEDRS)

https://www.colorado.gov/cdphe/r

Click on the above link and print the following from this website:

Click on: CEDRS and Zoonoses application

Secure External Web user form (PDF file); and

Supervisor Letter (to be printed on your facility letterhead)

Please fax the completed paperwork to 303-782-0338



Dedicated to protecting and improving the health and environment of the people of Colorado

Guidance for Clinical Microbiology Laboratories on Isolate Submission

The CDPHE Communicable Disease Epidemiology Section requests clinical microbiology laboratories send certain culture isolates and or clinical material to the CDPHE laboratory in addition to reporting positive lab results. The CDPHE laboratory performs additional testing [serotyping, serogrouping, pulsed field gel electrophoresis (PFGE)] on submitted isolates to identify outbreaks due to common strains or sub-types and to better understand the pathogens.

CDPHE requests all clinical microbiology laboratories in Colorado submit the following suspected or confirmed isolates or clinical material to the CDPHE laboratory:

- Bacillus anthracis
- Brucella species
- Corynebacterium diphtheriae
- Cyclospora cayetanensis
- Escherichia coli O157 and Shiga toxinproducing E. coli*
- Francisella tularensis
- Haemophilus influenzae (invasive body site^a)
- Neisseria meningitidis (invasive body site^a)
- Legionella species

- *Listeria monocytogenes* (from each positive specimen)
- Salmonella species (including typhi and non-typhi species)*
- Shigella species*
- Vibrio cholerae*
- Vibrio non-cholerae*
- Vancomycin-resistant (and intermediate) Staphylococcus aureus
- Yersinia pestis

In addition to the above, CDPHE also requests clinical laboratories located in the 7-county Denver metropolitan area (Emerging Infections Program [EIP]: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, and Jefferson counties) submit isolates of the following bacteria:

- Group A streptococci (GAS) from invasive body sites^{a,b}
- Group B streptococci (GBS) from invasive body sites^{a,c}
- Streptococcus pneumonia from invasive body sites^a
- Yersinia non-pestis from any body site
- Bordetella pertussis from any respiratory specimen

Invasive Body Sites^a (including, but not limited to):

- Blood
- CSF
- Bone
- Pleural fluid
- Peritoneal fluid • Pericardial fluid
- Joint/synovial fluid
- Internal body site (brain, heart, lymph node, liver, kidney, pancreas, ovary, spleen, or vitreous fluid)
- Vascular tissue (aorta, vena cava, etc.)
- Muscle tissue (GAS only)

^{*}If non-culture based methods are used to detect Shiga toxin, suspected E. coli O157, Salmonella, Shigella, or Vibrio, please forward inoculated broth or stool specimen to the CDPHE lab.

Isolate Submission: For questions about isolate submission or shipping instructions, please call: CDPHE Public Health Microbiology Laboratory -- 303-692-3480

To order supplies for shipping isolates, please visit: https://www.colorado.gov/pacific/cdphe/order-lab and click on 'Public health testing supply order form'

Disease Reporting: To report a case, please call:

Integrated Disease Reporting Program during business hours: 303-692-2700 or 1-800-866-2759 To report 24-hour reportable conditions on evenings, weekends, or holidays: 303-370-9395 A list of conditions reportable by all laboratories is available by calling 303-692-2700, or online at https://www.colorado.gov/pacific/cdphe/report-a-disease and click on 'Conditions reportable by all laboratories'

^c If GBS is isolated from placenta and/or amniotic fluid AND a fetal death occurs, it may be considered a maternal case for EIP, and the isolate is requested. However, routine submission of all GBS isolates from placental/amniotic fluid specimens is not required; should such isolates be submitted to the state lab, EIP epidemiologists will review the patient's medical chart to ascertain whether the patient meets the EIP case definition.

Additional notes:

- (1) Campylobacter, Cryptosporidium parvum, Clostridium difficile, and MRSA need to be reported on monthly line lists (submitted to EIP epidemiologist) but isolates do not need to be submitted, unless an agreement is already in place to send them.
- (2) Isolates for carbapenem-resistant *Enterobacteriaceae* and carbapenem-resistant *Acinetobacter* do not need to be submitted, **unless an agreement is already in place to send them.**
- (3) CDPHE requests that isolates/specimens of <u>any</u> organism relating to an outbreak be submitted to the state laboratory to assist in the investigation. In this situation, CDPHE epidemiologists will contact the reporting laboratory.



^a For clarification on whether an isolate meets the definition for 'invasive body site', please contact one of the EIP epidemiologists (Deborah, Ben, Jennifer, or Claire) at 303-692-2700 for guidance.

^b If GAS is isolated from a wound or surgical tissue/specimen <u>and</u> is accompanied by <u>necrotizing fasciitis</u> or <u>Streptococcal Toxic Shock Syndrome</u>, it should be considered a case for EIP, with submission of the isolate and reporting of the case.