

FAQs for Reportable Diseases/Conditions & Outbreaks

These FAQs are for healthcare providers and other mandatory disease reporters. For information on laboratory reporting requirements, visit <https://www.alabamapublichealth.gov/blog/assets/nd-reportable-results.pdf>.

Healthcare Facilities

Q1: What diseases or conditions are reportable and how do I report required information?

A list of reportable diseases and conditions can be found on the ADPH Communicable Disease REPORT web page located here:

<https://www.alabamapublichealth.gov/infectiousdiseases/report.html>

Report 4-hour reportable diseases/conditions by calling 1-800-338-8374. Report 24-hr and 3-day reportable diseases/conditions through the [REPORT Card for Reportable Diseases and Conditions](#).

Outbreaks can be reported using the same form. Reporters will select 'Outbreak' from the drop-down menu, and this will take the submitter to the Potential Outbreak Submission Form to report initial outbreak information. Call your local [ID&O POC](#) with any questions or concerns.

Q2: Are facilities required to report over the weekend?

Yes, facilities must report immediate, extremely urgent diseases/conditions within 4 hours of clinical suspicion. Immediate, urgent reportable diseases/conditions should be reported within 24 hours of presumptive diagnosis. Standard diseases/conditions should be reported within 3 days of diagnosis.

Q3: What are the penalties, if any, for delayed reporting?

Failure to report can result in a fine from \$100- \$500.

See page 207 of the Public Health Laws of Alabama document here:

<https://www.alabamapublichealth.gov/legal/assets/publichealthlawsofalabama.pdf>

Q4: What is an outbreak?

Generally, an outbreak can be defined as the occurrence of more cases of disease than expected in a given area or among a specific group of people over a particular period of time [linked to a common source](#). However, a good rule of thumb is two or more similarly ill persons who live in different households and have a common exposure.

In addition to this standard outbreak definition, there are two diseases that have very specific outbreak definitions. Those are COVID-19 and Legionellosis.

ADPH uses the CDC supported CORHA and CSTE outbreak definition for COVID-19. Outbreak criteria can be reviewed here on page 3: https://www.corha.org/wp-content/uploads/2024/01/COVID-19-HC-Outbreak-Definition-Guidance_January-2024.pdf

A single case of healthcare-associated Legionellosis can meet outbreak criteria if the case had 10 or more days of continuous stay at a healthcare facility in the 14 days before illness onset. Reference the CDC Legionella web site "[Things to Consider: Healthcare-associated Cases and Outbreaks](#)" for more information on Legionella outbreak investigations.

There are other conditions that may illicit an outbreak-like response upon the identification of a single case. Examples include: Gastrointestinal anthrax, Botulism, or Targeted Multidrug-Resistant Organisms such as *Candida auris* and Carbapenemase-Producing Organisms.

Outbreaks of any kind should be reported within 24 hours of presumptive diagnosis and includes both notifiable diseases *and* diseases not required to be individually reported such as norovirus, influenza, and head lice. It is imperative that outbreaks of any kind are reported timely so that appropriate control measures can be implemented. If an outbreak is suspected, facilities should not wait for laboratory results before reporting potential outbreaks. Facilities must report the outbreak independent of laboratory reporting.

Q5: What are the current CDC recommendations for COVID Outbreaks in Long Term Care Facilities as it relates to isolation and sequestering residents/patients.

Please refer to the CDC's [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#) for isolation & quarantine recommendations.

Q6: What is the return-to-work recommendations for staff after being COVID positive?

Please refer to CDC's [Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2](#) for return-to-work guidance.

Q7: To meet the outbreak reporting definition, do two or more positives need to result the same day or should you report an outbreak after two positives result over two or more days?

To meet outbreak criteria, cases do not have to test positive on the same day. Outbreaks can occur over an extended period of time; therefore, facilities should report any suspected outbreaks as soon as they have two or more individuals who are similarly ill and have a common exposure within a specified time period. Health department staff will work with facilities to determine whether potential outbreak submissions warrant further investigation.

Q8: Do we still need to complete COVID-19 LTC Investigation Forms for each resident and employee case as well as report an outbreak through the Online Incident Reporting System?

As of April 14th, 2024, long-term care facilities should only report resident cases via the [COVID-19 LTC Investigation Form](#). Skilled nursing facilities will continue to report COVID-19 cases into NHSN as per the CMS mandate.

Outbreaks should be reported to ID&O through the Potential Outbreak Submission Form.

The use of the Online Incident Reporting System is a separate reporting requirement through the Bureau of Health Provider Standards.

Please refer to the Bureau of Health Provider Standards (HPS), Division of Health Care Facilities and Provider Services Unit for [reporting rules](#) and requirements for the [Online Incident Reporting System](#).

Q9: Do all covid cases require an online report or is it if it's 2 or more in your facility? Does it apply only to Covid or any infectious disease?

Individual case reporting is separate from outbreak reporting. All individual cases of reportable diseases and conditions should be reported via the [REPORT Card for Reportable Diseases and Conditions](#). If the facility identifies an outbreak of any kind, they should report that separately to the health department by selecting 'Outbreak' from the drop-down menu of the [REPORT Card for Reportable Diseases and Conditions](#).

Q10: The list of reportable diseases on ADPH still has 4 hours to report SARS COV. Please clarify.

SARS CoV (the pathogen responsible for the 2002-2003 SARS outbreak in China) remains to be a 4-hour reportable condition. SARS-CoV-2 (the pathogen that causes COVID-19 infection) is a 24-hour reportable condition for congregate living facilities only.

Q11: After reporting notifiable diseases/conditions & outbreaks, what additional follow-up is expected?

Public health may request additional documents to include, but may not be limited to, medical records, laboratory reports, water management plans, and additional information as necessary.

Q12: What laboratory testing is required?

This is dependent on the facility's laboratory capacity. There are no mandated testing methods required by ADPH.

There are, however, certain pathogens for which laboratories are required to submit clinical materials for testing at the state public health laboratory. For information on laboratory specimen submission and reporting requirements, visit <https://www.alabamapublichealth.gov/blog/assets/nd-reportable-results.pdf>

Q13: What actions must the Infection Preventionist take to ensure other patients are not exposed once the outbreak is identified?

This is dependent on the pathogen and the facility policies for isolation. IPs should be familiar with which transmission-based precautions are applicable to prevent transmission within facility.

Please refer to CDC's Infection Control web page: "Type and Duration of Precautions Recommended for Selected Infections and Conditions"
<https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html>

COVID-19 healthcare facility specific transmission-based precautions can be found here:
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

Q14: How will information about outbreaks be shared?

The facility will receive a final report at the conclusion of the outbreak. No personal identifiable information (PII) will be shared with the public. If, in the interest of public health, a facility name must be released, ADPH will work with the facility beforehand to ensure the information that will be shared is known to the facility. If information has been released by a case, a contact of a case, family members, social media, or a facility, etc., ADPH may be asked to respond to media requests.

Schools & Childcare Facilities

Q15: What are schools and childcare facilities required to report?

Unless the school or childcare facility staff is conducting testing or diagnosing a disease or condition, they are not expected to report individual cases of diseases and conditions. Schools and childcare facilities do not need to report diseases or conditions based on reports from parents. If the school or childcare facility is notified of a specific disease or condition, they should refer to the [Communicable Disease Chart for Alabama Schools and Childcare Facilities](#) for exclusion criteria.

Schools and childcare facilities are required to report outbreaks of any kind within 24 hours of presumptive diagnosis.

Q16: Which outbreaks are schools required to report?

An outbreak can be defined as the occurrence of more cases of disease than expected in a given area or among a specific group of people over a particular period of time linked to a common source. However, a good rule of thumb is two or more similarly ill persons who live in different households and have a common exposure.

Outbreaks of any kind should be reported within 24 hours of presumptive diagnosis and includes both notifiable diseases *and* diseases not required to be individually reported such as norovirus, influenza, head lice, etc. Examples of outbreaks may include an illness among a sports team, extracurricular group, or classroom. For COVID-19 and other respiratory diseases, a good rule of thumb would be absenteeism of 20% or more of the school population. For other pathogens, the outbreak definition above would apply.

Q17: How do schools and childcare facilities report outbreaks?

Outbreaks can be reported using the [REPORT Card for Reportable Diseases/Conditions](#). Reporters will select 'Outbreak' from the drop-down menu, and this will take the submitter to the Potential Outbreak Submission Form. Call [ID&O POC](#) in district with questions. The ID&O

POC will work with school and childcare facilities to gather additional information during the outbreak investigation.

Q18: Where can we find control measures for commonly reported outbreaks in schools?

Please refer to the fast fact flyers on the ADPH web page:

<https://www.alabamapublichealth.gov/infectiousdiseases/index.html>

Please refer to the CDC web pages for individual diseases/conditions listed on the ADPH web page: <https://www.alabamapublichealth.gov/infectiousdiseases/detect.html>

Q19: Is there a different reporting mechanism for vaccine-preventable diseases (e.g., Polio, Chickenpox (Varicella), Measles, Mumps, Rubella, Pertussis, Tetanus, Diphtheria, *Haemophilus influenzae* type B, Meningococcal disease (*Neisseria meningitidis*), Acute Hepatitis A & B, Invasive Pneumococcal disease (*Streptococcus pneumoniae*)?

Contact the ADPH Immunization Division at (334) 206-5023 or 1 (800) 469-4599. Visit the Immunization web pages for more information:

<https://www.alabamapublichealth.gov/immunization/index.html>.

Currently, measles cases are on the rise and the Immunization Division is interested in reports of cases whether through a provider's office or parent. Visit the Measles web pages for more information: <https://www.alabamapublichealth.gov/immunization/measles.html>.

Q20: Will ADPH close a school in the event of an outbreak?

No, ADPH will provide control measure recommendations. School closures are left to the discretion of the school administrator.