

## Communicable Diseases Prioritization of Public Health Follow-up

Communicable Disease Control (CDC) is a mandated program. All communicable disease reports will be prioritized and followed-up in a timely manner. These guidelines should be referred to for prioritization of communicable diseases within the regular Public Health Nurse (PHN) workload.

The CDC Investigation Form (MG-2357) should be completed and submitted to the Communicable Disease (CD) Coordinator whom will then forward to Manitoba Health CDC unit within 30 days of receiving the initial referral. There are some communicable diseases which require more rapid completion of the disease-specific Investigation Form (e.g. West Nile virus).

**Note:** The following is not a complete list of all communicable diseases. Consult with the CD Coordinator should you have questions regarding prioritization of follow-up of those communicable diseases not included in this list.

**HIGH PRIORITY** - guiding principles may include high case fatality rate, high transmissibility, high outbreak potential and effective Public Health intervention.

**Initiate investigation within one (1) business day of receiving lab report/ referral.** Please also investigate clinical reports from physicians or the community. If the area PHN is not working (e.g. vacation), the covering PHN for the area needs to communicate with the CD Coordinator for guidance.

- Outbreaks/clusters of reportable communicable diseases or outbreaks/clusters of potentially serious non-reportable diseases or conditions (e.g. chickenpox).
- Communicable Diseases:
  - Anthrax
  - Avian influenza
  - Botulism
  - Cholera
  - Diphtheria (cases & carriers)
  - *E. coli* 0157:H7/VTEC
  - *Haemophilus influenzae* type b invasive disease
  - Hepatitis A
  - Hepatitis B (new positive)
  - Invasive Group A streptococcal disease (including necrotizing fasciitis/myositis and toxic shock syndrome)
  - Measles
  - Meningococcal invasive disease
  - Mumps
  - Pertussis
  - Plague
  - Polio
  - Rabies
  - Rubella (including congenital rubella infection/syndrome)
  - Severe acute respiratory infection (SARI)
  - Smallpox
  - Sexually Transmitted Infections occurring in children & pregnant women
  - Syphilis
  - Tuberculosis
  - Typhoid fever
  - Viral hemorrhagic fever
  - West Nile virus infection (report submitted to MB Health CDC unit within 5 business days)
  - Yellow fever

- Other
  - Waterborne gastrointestinal illnesses associated with public and semi-public water systems.
  - “Diseases of interest” or a disease or condition presenting itself with unusual clinical manifestations (e.g. pandemic influenza).
  - Deaths attributable to a reportable infectious disease.

**MEDIUM PRIORITY** - guiding principles may include high case morbidity, fatality potential and outbreak potential, but less effective/less urgent need for Public Health follow-up.

**Initiate investigation within three (3) business days of receiving lab report/referral.** If the area PHN is not working (e.g. vacation) for more than 3 business days, the covering PHN for the area will initiate the investigation (if not already initiated) or follow-up if the investigation has already been initiated. The PHN may call the CD Coordinator for guidance.

- Communicable Diseases:
  - Campylobacter infection
  - Chancroid
  - Creutzfeldt-Jakob disease
  - Hantavirus infection
  - Legionellosis
  - Listeriosis
  - Lymphogranuloma venereum (LGV)
  - Pneumococcal invasive disease
  - Salmonellosis
  - Shigellosis
  - Tetanus infection

**LOW PRIORITY**

**Initiate investigation within five (5) business days of receiving the lab report/referral.** If the area PHN is not working (e.g. vacation) for more than 5 business days, the covering PHN for the area will initiate the investigation (if not already initiated) or follow-up if the investigation has already been initiated. The PHN may call the CD Coordinator for guidance.

- Communicable Diseases:
  - Amebiasis
  - Acquired immune deficiency syndrome (AIDS)
  - Cryptosporidiosis
  - Cyclosporiasis
  - Giardiasis
  - Hepatitis C
  - HIV
  - Lyme disease
  - Malaria
  - Sexually Transmitted Infections (chlamydia & gonorrhea) occurring in adults
- **Note:** under certain circumstances, low and medium priority diseases may become high priority. Examples of such circumstances include:
  - Exposures to communicable diseases occurring in high-risk groups such as care facilities (daycare, hospital, personal care home, school), food handlers, etc.
  - Prophylaxis is available and recommended on a timely basis (e.g. chickenpox in pregnancy).
  - High profile diseases (e.g. hantavirus).