

Nebraska Administrative Code
Topic - HEALTH AND HUMAN
SERVICES SYSTEM
Title 173 - CONTROL OF
COMMUNICABLE DISEASE
Chapter 1 - REPORTING AND
CONTROL OF COMMUNICABLE
DISEASES
Section 173-1-007 - CONTROL
MEASURES FOR COMMUNICABLE
DISEASES

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Current through September 20, 2023

For the information of the public, the latest editions of these publications are used as a reference by the DHHS Division of Public Health, local public health departments, and healthcare providers in the control of communicable diseases: "Control of Communicable Diseases Manual", published by the American Public Health Association, 800 I Street NW, Washington, D.C. 20001-3710 and disease-specific recommendations of the Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, as published in the "Morbidity and Mortality Weekly Report."

007.01 Public Health Interventions, Noncompliance, and Directed Health Measures

1-007.01A Public Health Interventions: The healthcare provider attending a case or suspected case of a disease requiring isolation, quarantine, or other public health interventions, must make reasonable efforts to prevent the spread of the disease to others and must report the case to the local public health department or the DHHS Division of Public Health.

1-007.01B Noncompliance: Healthcare providers must report immediately to the local public health department or the DHHS Division of Public Health, the name, address, and other pertinent information for all individuals with diseases requiring isolation, quarantine, or other public health interventions who refuse to comply with prescribed public health interventions.

1-007.01C Directed Health Measures: The DHHS Division of Public Health may order a directed health measure as provided in 173 NAC 6, or in the case of tuberculosis, advise the local county attorney for proceedings under the Tuberculosis Detection and Prevention Act.

007.02 Contact Notification in Reportable Communicable Disease and Poisoning Investigations

1-007.02A Notification of Possible Contacts: In order to protect the public's health and to control the spread of disease, in cases of reportable communicable disease or poisonings other than those covered by 173 NAC 1-007.02B, the DHHS Division of Public Health may notify individuals who are determined to be possible contacts of the source of the disease or poisoning by any means reasonably necessary.

1-007.02B Partner Identification and Notification in STD Cases:

1-007.02B1 In order to protect the public's health, when an individual is tested and found to have an STD as defined in 173 NAC 1-004.05, the DHHS Division of Public Health or local public health department will conduct partner notification and referral activities in cases of HIV disease and early syphilis, and may conduct these activities as appropriate for other STD's. Other local health related agencies may conduct these activities if staff have received appropriate training as determined by DHHS.

1-007.02B2 "Partner" is defined as any individual, including a spouse, who has shared needles, syringes, or drug paraphernalia or who has had sexual contact with an individual infected with an STD as defined in 173 NAC 1-004.05. In the case of HIV disease, in accordance with the Ryan White HIV/AIDS Treatment

Modernization Act, "spouse" is defined as any individual who is the marriage partner of that person at any time within the ten-year period prior to the diagnosis of HIV disease.

007.03 Responsibilities of Laboratories: All laboratories performing clinical testing on Nebraska residents

1. Must forward to the Nebraska Public Health Laboratory isolates of special public health interest indicated in 173 NAC 1-004.01A and 1-004.02; contact a state or local public health department before shipping any isolates or specimens suspected of containing: *Yersinia, Francisella, Brucella, Bordetella, Coxiella, or Bacillus* species. Contact the receiving laboratory prior to shipping the isolate or specimen.
2. Which diagnose reportable diseases with non-culture diagnostic methods (e.g. *E.coli* gastroenteritis with a shiga toxin assay) and which do not isolate the actual organism must, if ordered by the department (pursuant to NEB.REV.STAT § 71-502 or 173 NAC), forward the clinical sample testing positive to the Nebraska Public Health Laboratory; and
3. Must forward if ordered by the department (pursuant to NEB.REV.STAT § 71-502 or 173 NAC) isolates or specimens to the Nebraska Public Health Laboratory or the CDC laboratories.

007.04 Responsibilities of Schools

School nurses or those acting in the capacity of a school nurse must, in accordance with state and federal statutes:

1. Notify the local public health department or the DHHS Division of Public Health of cases or suspected cases of reportable diseases as indicated in 173 NAC 1-004.01 and 1-004.02, or outbreaks and suspected outbreaks of diseases as indicated in 173 NAC 1-004.01B affecting students and/or other school-affiliated personnel and which present a reasonable threat to the safety or health of a student and/or other school-affiliated personnel; and
2. Cooperate with public health authorities in obtaining information needed to facilitate the investigation of cases and suspected cases, or outbreaks and suspected outbreaks of diseases affecting students and/or other school-affiliated personnel.

All information disclosed to a public health authority is confidential and not to be released to outside parties as stipulated by Neb. Rev. Stat. § 71-503.01.

007.05 Significant Exposure of Emergency Medical Services personnel and Healthcare Workers to Infectious Diseases or Conditions

Neb. Rev. Stat. §§ 71-507 to 71-513 address the risk of significant exposure of emergency services providers to infectious diseases or conditions, and Neb. Rev. Stat. §§ 71-514.01 to 71-514.05 address the risk of significant exposure of healthcare providers to infectious diseases or conditions.

1-007.05A For the purpose of implementing these statutes, infectious disease or condition means:

1. Hepatitis B;
2. Hepatitis C;
3. Meningococcal meningitis;
4. Active pulmonary tuberculosis;
5. Human immunodeficiency virus infection;
6. Diphtheria;
7. Plague;
8. Hemorrhagic fevers;
9. Rabies;
10. Severe acute respiratory syndrome;
11. Middle East respiratory syndrome.

1-007.05B Significant Exposure Report Form for Emergency Services Providers: For the purpose of implementing Neb. Rev. Stat. § 71-508, the form to be used by the emergency services provider to document information necessary for notification of significant exposure to an infectious disease or condition is Attachment E, incorporated in these regulations by this reference. Emergency services providers are responsible for reproduction of the form for use in the notification procedure.

Amended effective 1/1/2017.

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