GUIDELINES FOR THE IMPLEMENTATION AND ENFORCEMENT OF BOSTON PUBLIC HEALTH COMMISSION'S DISEASE SURVEILLANCE AND REPORTING REGULATION

APPROVED:	
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	Executive Director
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Section I. Purpose

The Boston Public Health Commission (herein after "BPHC) has determined that a real time surveillance system of hospital and other health care facility emergency, urgent care units and research laboratories working with certain agents, will allow for the earliest possible detection of increases in morbidity due to infectious and non-infectious causes. Therefore, timely access to information regarding incidence of disease syndromes, any outbreak or cluster of a disease and potential exposures to reportable diseases deemed harmful to the public health is critical in protecting the health of the citizens of the City of Boston.

Section II. Authority

These guidelines are promulgated by the Executive Director of the Boston Public Health Commission, pursuant to the Boston Public Health Commission's Disease Surveillance and Reporting Regulation (herein after "Regulation.")

Section III. Definitions

Director means the Director of the Boston Public Health Commission's Communicable Disease Control Division.

Expose or Exposure mean any situation arising from or related to the work operation of an employer where an employee or a community resident may ingest, inhale, absorb through the skin or eyes or otherwise come into contact with any high risk agent.

Occupational Health Officer means a licensed physician experienced in occupational medicine or a registered nurse experienced in occupational health nursing, designated by the employer. The Occupational Health Officer may also name a designee to perform occupational health assessments or evaluations, who is also a licensed physician experienced in occupational medicine or a registered nurse experienced in occupational health nursing.

Research Laboratory means a workplace or a work area of a workplace which is used primarily for research, development, non-routine testing or experimentation activity in which any high risk agent is used by or under the direct supervision of a technically qualified individual.

High Risk Agent means any select agent, agents in risk group RG-4 as specified in the National Institute of Health's Guidelines for Research Involving Recombinant DNA Molecules and Biosafety in Microbiological and Biomedical Laboratories published by the US Centers for Disease Control and Prevention and the National Institutes of Health and the amendments and rulings made relative thereto from time to time (hereinafter "NIH Guidelines/BMBL"), highly pathogenic avian influenza, SARS or any other agent identified by the Director. The Director shall compile and update, as necessary, a list of high risk agents. The list shall be posted on the BPHC's website at www.bphc.org/labs

Select Agent means microbial and toxic agents listed at 42 CFR 73.4, 42 CFR 73.5, and 9 CFR 121.2 and the rulings made by the US Centers for Disease Control and US Department of Agriculture relative thereto as amended from time to time.

Work Area means a defined space, or a room or rooms, or other area where infectious agents or substances are produced, stored, or used, and where employees are present in the course of their employment. A work area may include an entire workplace.

Workplace means an establishment or business of an employer at one geographic location at which work is performed and containing one or more work areas.

Section IV. Emergency Department and Urgent Care Facility Surveillance Reporting Procedures

A. Reporting Requirements

- 1. All healthcare facilities must report information for each visit made to the emergency room and urgent care facility that it operates.
- 2. A separate report must be filed for each emergency room and urgent care facility.

B. Report Content

1. The report must contain information for all visits made to the facility commenced during the period. The period shall be from 12:00a.m. until 11:59p.m.

- 2. The information regarding each visit shall be submitted using an electronic format provided by the BPHC. The following information shall be submitted for each visit:
 - a. Age at the time of visit;
 - b. Gender Male, Female or as otherwise determined by the health care provider;
 - c. Race/Ethnicity;
 - d. Zip code of patients primary residences;
 - e. Chief Complaint;
 - f. Diagnostic code; and,
 - g. A unique identifier so that the facility can obtain additional information as needed by public health as part of an investigation.
- 3. All information must be provided according to the timeline in Section C of these guidelines, with the exception of diagnostic codes. If the diagnostic code is not available at the time of the visit, it shall be submitted within 24 hours of when it becomes available.

C. Report Submission

- 1. Data shall be transmitted using Secure File Transfer Protocol (SFTP) to Boston Public Health Commission's hospital volume surveillance system.
- 2. Data for the reporting period must be sent by 7a.m. the following day. For example, volume figures for 01/01/04 would be sent between 12a.m. and 7a.m. on 01/02/04
- 3. All facilities will be provided with a unique user ID and password by the BPHC.

Section V. Research Laboratory Reporting Procedures

A. Registration of Facilities and Agents

- 1. All research laboratories possessing, producing, storing, or otherwise working with any high risk agent shall register with the BPHC.
- 2. Such registration, on a form provided by the BPHC's Office of Environmental Health, shall include the following:
 - a. Name of the high risk agent or agents;
 - b. The location of each high risk agent;
 - c. Principal Investigator responsible for the high risk agent (s);

- d. Title and a brief description of the nature of the project;
- e. Grant identification number or other unique institutional identifier number for the project;
- f. Contact information of the institutional biosafety committee (IBC) (if applicable); and,
- g. Name and contact information of the Occupational Health Officer.
- 3. The information in the registration form shall be updated, on a form provided by the BPHC's Office of Environmental Health, every July 31 and January 31 (or on the next business day if it falls on a holiday or weekend) following registration.

B. Research Laboratory Reporting Requirements

- 1. The Occupational Health Officer or designee shall perform an occupational health assessment for any laboratory employee or other individual having access to the laboratory who; has been diagnosed with; is exhibiting symptoms of; or, may have been exposed to, any high risk agent registered pursuant to Section V. Part A of these guidelines. The findings of the assessment shall be immediately reported, but not later one business day after completion of the assessment, to the BPHC.
- 2. Any employee absent from the work place due to illness for a period of two or more consecutive work days shall be evaluated by the Occupational Health Officer or designee prior to returning to work. If the Occupational Health Officer has a reasonable suspicion that the employee's illness may be related to an exposure to any high risk agent registered pursuant to Section V. Part A of these guidelines, the Occupational Health Officer shall immediately notify, but not later than one business day of the assessment, the BPHC.
- 3. The IBC, Principal Investigator or Occupational Health Officer, shall report to the BPHC within one business day: any diagnosis of any disease caused by a high risk agent registered pursuant to Section V. Part A of these guidelines; and, any violation or breach of any laboratory procedures or any other incident which the IBC, Project Director or Occupational Health Officer should reasonably believe released beyond the work area, any high risk agent registered pursuant to Section V. Part A of these guidelines.

- 4. The Director shall notify each facility registered pursuant to Section V. Part A. of these guidelines of the appropriate procedures for reporting. This information shall also be published on the BPHC's website at www.bphc.org/labs
- 5. Institutions operating multiple laboratories may direct their IBC, Biosafety Office or Occupational Health Office to coordinate all registration and reporting required by these guidelines.
- 6. All reporting pursuant to Section V. B. shall be made to the Director. Contact information is available at www.bphc.org/cdc or (617) 534-5611.

C. Effective Dates of Section V

- 1. Section V. Part A shall go into effect May 31, 2005.
- 2. Section V. Part B shall go into effect April 29, 2005.