7.4.3 NMAC

TITLE 7 HEALTH
CHAPTER 4 DISEASE CONTROL (EPIDEMIOLOGY)
PART 3 CONTROL OF DISEASE AND CONDITIONS OF PUBLIC HEALTH SIGNIFICANCE

7.4.3.1 ISSUING AGENCY: New Mexico Department of Health.
[7.4.3.1 NMAC - Rp, 7.4.3.1 NMAC, 04/30/2009]

7.4.3.2 SCOPE: All physicians, laboratories, health care professionals, and other persons having knowledge of diseases or conditions covered by these regulations.
[7.4.3.2 NMAC - Rp, 7.4.3.2 NMAC, 04/30/2009]

7.4.3.3 STATUTORY AUTHORITY: These provisions set forth herein are promulgated by the secretary of the department of health by authority of NMSA 1978 Section 9-7-6(E) and in conformity with the Public Health Act, particularly NMSA 1978 Sections 24-1-3C, 24-1-7, and 24-1-15 and pursuant to the Hospital-Acquired Infection Act, NMSA 1978, Sections 24-29-1 through 24-29-6. Administration and enforcement of these rules are the responsibility of the epidemiology and response division of the department of health.
[7.4.3.3 NMAC - Rp, 7.4.3.3 NMAC, 04/30/2009; A, 02/29/2012]

7.4.3.4 DURATION: Permanent.
[7.4.3.4 NMAC - Rp, 7.4.3.4 NMAC, 04/30/2009]

7.4.3.5 EFFECTIVE DATE: April 30, 2009, unless a later date is cited at the end of a section.
[7.4.3.5 NMAC - Rp, 7.4.3.5 NMAC, 04/30/2009]

7.4.3.6 OBJECTIVE: The essential objective of these rules is the control of disease and conditions of public health significance through the prompt identification of disease, notification of responsible health authorities, and institution of preventive and ameliorative measures.
[7.4.3.6 NMAC - Rp, 7.4.3.6 NMAC, 04/30/2009]

7.4.3.7 DEFINITIONS: As used in these provisions, the following terms shall have the meaning given to them, except where the context clearly requires otherwise.

A. “Acute care hospital” means a hospital providing emergency services, in-patient medical and nursing care for acute illness, injury, surgery or obstetrics; ancillary services such as pharmacy, clinical laboratory, radiology, and dietary are required for acute care hospitals.

B. “Carrier” means an infected person or animal that harbors a specific infectious agent without clinical symptoms and that serves as a potential source of infection for humans.

C. “Carrier” means an infected person or animal that harbors a specific infectious agent without clinical symptoms and that serves as a potential source of infection for humans.

D. “Condition of public health significance” means a condition dangerous to public health or safety.

E. “Designee” means an agency or institution designated by the department of health to receive reports of notifiable conditions on its behalf for the purpose of public health surveillance.

F. “Disease” means an illness, including those caused by infectious agents or their toxic products which may be transmitted to a susceptible host.

G. “Division” means the epidemiology and response division of the department of health, P.O. Box 26110, Santa Fe, NM 87502-6110.

H. “Health care professional” means any licensed doctor of medicine or osteopathy, nurse, physician’s assistant, midwife, veterinarian or other licensed health care provider.

I. “Isolation, detention or quarantine” means the complete separation or partial restriction of movement and association in such manner and for such period to prevent the direct and indirect transmission of the infectious agent.

J. “Laboratory” means the scientific laboratory division of the department of health or any other laboratory which performs diagnostic tests on specimens obtained from New Mexico sources for diseases and conditions covered by these rules.

K. “Notifiable condition” means a disease or condition of public health significance required by statute or these rules to be reported to the department of health.
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L. “Other person” includes but is not limited to: laboratory staff; an official in charge of any health facility; hospital records or administrative personnel; the principal or person in charge of any private or public school, or child care center; teachers and school nurses; and a householder or any other person, in the absence of a health care professional having direct knowledge of a disease or condition of public health significance.

M. “Regional or local public health office” means a public health office designated by the public health division of the department of health.

N. “Report” means a notification to the department of health pursuant to these rules.

O. “Specimen” means any material derived from humans or animals for examination for diagnosis, prevention or treatment of any disease or condition of public health significance.

[7.4.3.7 NMAC - Rp, 7.4.3.7 NMAC, 04/30/2009; A, 02/29/2012; A, 06/15/2016]

7.4.3.8 NOTIFIABLE CONDITIONS:

A. Declaration of notifiable conditions: The division shall periodically issue a list of notifiable conditions according to reporting category designated as 7.4.3.13 NMAC. The list shall be reviewed on a regular basis and revised as necessary. Diseases shown in 7.4.3.13 NMAC are declared notifiable conditions as of the effective date.

B. Official listing: The list of notifiable conditions shall be issued in a quick reference format and shall show that it is the current official list and shall specify its effective date. The division shall routinely supply the current official list to health care professionals and health facilities and to other persons or entities on request.

C. Reporting of notifiable conditions: Reporting will be by means of the following:
   (1) the division’s 24-hour telephone number as listed in the report, “New Mexico epidemiology,” the division’s newsletter or by direct telephone contact with the regional or local public health office;
   (2) the division’s toll-free telephone receiving and recording system telephone number listed in the report “New Mexico epidemiology”;
   (3) for specified conditions, reporting to the address/phone number published on the printed form of the “list of notifiable conditions”;
   (4) written report to the division; or
   (5) electronic transmission, which includes facsimile and computer data transfers.

D. Reporting requirements - health care professionals: Every health care professional treating any person or animal having or suspected of having any notifiable condition shall report the condition within the time and in the manner set out in the list of notifiable conditions.

E. Reporting requirements - laboratories: All laboratories performing diagnostic tests for any notifiable condition shall report all positive findings within the time and in the manner set out in the list. Reports shall include the name of the reporting laboratory, the patient’s name, date of birth/age, and address, the date of clinical diagnosis, if known, and the health care professional or hospital requesting the test.

F. Reporting requirement - other persons: Any other person, including all persons listed in Subsection L of 7.4.3.7 NMAC of these rules, having knowledge of any person having or suspected of having a notifiable condition, shall immediately report the condition to the division.

G. Conditions of public health significance: Any person, including health care professionals and persons listed in Subsection L of 7.4.3.7 NMAC of these rules, having knowledge of a notifiable condition shall immediately report the condition to the division.

[7.4.3.8 NMAC - Rp, 7.4.3.8 NMAC, 04/30/2009; A, 02/29/2012]

7.4.3.9 CONTROL OF DISEASE AND CONDITIONS OF PUBLIC HEALTH SIGNIFICANCE:

A. Responsibility for protection of public health: The department of health may take such measures as are deemed necessary and proper for the protection of the public health.

B. Coordination among agencies: The department of health shall coordinate the efforts of other concerned or interested federal, state and local agencies and shall cooperate with local health care professionals and health care facilities.

C. Imposition of isolation or quarantine: The department of health may establish or require isolation or quarantine of any animal, person, institution, community or region.

D. Case incidence in schools or health facilities: Where any case of communicable disease occurs or is likely to occur in a public, private, or parochial school, child care facility, or in a health care facility, the department of health may require the school or facility to:
(1) exclude infected persons and non-immune persons, whether students, patients, employees or other persons;

(2) close and discontinue operations if there is likelihood of an epidemic.

E. Refusal of voluntary treatment, detention or observation: When a person who is actively infectious with a threatening communicable disease refuses voluntary treatment, detention or observation, the department of health may seek a court order to detain the person pursuant to Section 24-1-15 NMSA 1978 of the Public Health Act until the person is no longer a contagious threat to the public or the person voluntarily complies with appropriate treatment and contagion precautions.

F. Other public health orders: The department of health may issue orders for the testing of particular populations or groups of persons or animals to identify carriers of disease, including immigrants, travelers, students or preschoolers and others who have been at risk of transmission or exposure. The department of health may require that all tests be done under the control of the scientific laboratory division or by a laboratory approved for that purpose.

G. Enforcement of public health orders: Any order issued by the department of health under the Public Health Act or these rules shall be enforceable as provided by law and violation is punishable in accordance with Section 24-1-21 NMSA 1978.

H. Medical records: To carry out its duties to investigate and control disease and conditions of public health significance, the department of health or designee shall have access to all medical records of persons with, or suspected of having, notifiable diseases or conditions of public health significance. The department of health is a “public health authority” as defined by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Privacy Rule. The department of health is authorized to receive protected health information without patient authorization for purposes of public health surveillance, investigation and interventions and as otherwise required by law. The division or designee may periodically review medical records to ensure the completeness and quality of reporting.

I. Confidentiality of reports: All notifiable condition reports are confidential. Disclosure to any person of report information, except for disclosure for the purpose of prevention, treatment or control, is prohibited unless disclosure is required by law.

J. Research use of notifiable condition data: Researchers authorized by the division or its designee who certify to the satisfaction of the division that confidentiality of data will be maintained in accordance with applicable state and federal confidentiality requirements, may conduct studies utilizing notifiable condition data, including studies of the sources and causes of conditions of public health significance, evaluations of the cost, quality, efficacy and appropriateness of screening, diagnostic, therapeutic, rehabilitative and preventive services and programs relating to conditions of public health significance and other clinical or epidemiologic research.

[7.4.3.9 NMAC - Rp, 7.4.3.9 NMAC, 04/30/2009; A, 02/29/2012; A, 06/15/2016]

7.4.3.10 EMERGENCY DEPARTMENT REPORTING:

A. Reporting requirements: Hospitals shall report all emergency department visits electronically to the department of health in such a format, with such data elements and in accordance with such standards of quality, timeliness and completeness as established by the department of health.

B. Confidentiality: All emergency department visit reports are confidential. Disclosure to any person of report information, except for disclosure of a notifiable condition for the purpose of prevention or control of diseases and other health conditions, is prohibited unless disclosure is required by law.

[7.4.3.10 NMAC - Rp, 7.4.3.10 NMAC & 7.4.3.11 NMAC, 04/30/2009]

7.4.3.11 HEALTHCARE-ASSOCIATED INFECTION REPORTING: Acute care hospitals only will submit data to the New Mexico department of health using the centers for disease control and prevention national healthcare safety network (NHSN) and confer rights to access the data to the New Mexico department of health for central line-associated bloodstream infections and clostridium difficile infections. All carbapenem-resistant enterobacteriaceae and carbapenem-resistant pseudomonas aeruginosa cases, including non-healthcare-associated, will be reported to the New Mexico department of health.

[7.4.3.11 NMAC - N, 02/29/2012; A, 06/15/2016]

7.4.3.12 REPEALER: These requirements repeal and replace all previous rules, particularly rules governing the control of communicable disease of November 11, 1952, rules governing the reporting of notifiable disease of June 29, 1974 and rules governing the control of disease and conditions of public health significance of 1980.
7.4.3.13  NOTIFIABLE DISEASES OR CONDITIONS IN NEW MEXICO:

A. All reports including electronic laboratory reports of notifiable conditions, must include:
   (1) the disease or condition being reported;
   (2) patient’s name, date of birth/age, gender, race/ethnicity, address, patient telephone numbers, and occupation;
   (3) physician or licensed healthcare professional name and telephone number; and
   (4) healthcare facility or laboratory name and telephone number, if applicable.

B. Laboratory or clinical samples for conditions marked with (*) are required to be sent to the scientific laboratory division.

C. Emergency reporting of diseases or conditions: The following diseases, confirmed or suspected, require immediate reporting by telephone to the epidemiology and response division at (505) 827-0006.
   (1) Infectious diseases:
      (a) anthrax*;
      (b) avian or novel influenza*;
      (c) bordetella species (including pertussis)*;
      (d) botulism (any type)*;
      (e) cholera*;
      (f) diphtheria*;
      (g) haemophilus influenzae invasive infections*;
      (h) measles;
      (i) Middle East respiratory syndrome;
      (j) meningococcal infections, invasive*;
      (k) plague*;
      (l) poliomyelitis, paralytic and non-paralytic;
      (m) rabies;
      (n) rubella (including congenital);
      (o) severe acute respiratory syndrome (SARS)*;
      (p) smallpox*;
      (q) tularemia*;
      (r) typhoid fever*;
      (s) viral hemorrhagic fever;
      (t) yellow fever.
   (2) Other conditions:
      (a) suspected foodborne illness in two or more unrelated persons*;
      (b) suspected waterborne illness or conditions in two or more unrelated persons*;
      (c) illnesses or conditions suspected to be caused by the intentional or accidental release of biologic or chemical agents*;
      (d) acute illnesses or conditions of any type involving large numbers of persons in the same geographic area;
      (e) severe smallpox vaccine reaction;
      (f) other illnesses or conditions of public health significance.

D. Routine reporting of diseases or conditions:
   (1) Infectious diseases (report case within 24 hours to epidemiology and response division by fax at 505-827-0013 or by phone at 505-827-0006; or contact the local health office).
      (a) arboviral disease;
      (b) brucellosis;
      (c) campylobacter infections*;
      (d) chikungunya virus disease;
      (e) clostridium difficile*;
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(f) coccidioidomycosis;
(g) Colorado tick fever;
(h) cryptosporidiosis;
(i) cisticercosis;
(j) cyclosporiasis;
(k) dengue;
(l) E. coli 0157:H7 infections*;
(m) E. coli, shiga-toxin producing (STEC) infections*;
(n) encephalitis, other;
(o) giardiasis;
(p) group A streptococcal invasive infections*;
(q) group B streptococcal invasive infections*;
(r) Hansen’s disease/leprosy;
(s) hantavirus pulmonary syndrome;
(t) hemolytic uremic syndrome;
(u) hepatitis A, acute;
(v) hepatitis B, acute or chronic;
(w) hepatitis C, acute or chronic;
(x) hepatitis E, acute;
(y) influenza-associated pediatric death;
(z) influenza, laboratory confirmed hospitalization only;
(aa) legionnaires’ disease;
(bb) leptospirosis;
(cc) listeriosis*;
(dd) lyme disease;
(ee) malaria;
(ff) mumps;
(gg) necrotizing fasciitis*;
(hh) psittacosis;
(ii) q fever;
(jj) relapsing fever;
(kk) Rocky Mountain spotted fever;
(ll) salmonellosis*;
(mm) shigellosis*;
(nn) St. Louis encephalitis infections;
(oo) streptococcus pneumoniae, invasive infections*;
(pp) tetanus;
(qq) trichinellosis;
(rr) toxic shock syndrome;
(ss) varicella;
(tt) vibrio infections*;
(uu) west nile virus infections;
(vv) western equine encephalitis infections;
(ww) yersinia infections*.

(2) Infectious diseases in animals (report case within 24 hours to epidemiology and response division at 505-827-0006; or contact the local health office).
(a) arboviral, other;
(b) brucellosis;
(c) psittacosis;
(d) west nile virus infections.

(3) Tuberculosis*. Report suspect or confirmed cases to NM department of health tuberculosis program by fax at 505-827-0163 or by phone at 505-827-2471 or 505-827-2473: active disease within 24 hours; infection within 72 hours.

(4) Sexually transmitted diseases. Report to infectious disease bureau - STD program, NM department of health, P.O. Box 26110, Santa Fe, NM 87502-6110, fax 505-476-3638; or call 505-476-3636.
(a) chancroid;
(b) chlamydia trachomatis infections;
(c) gonorrhea;
(d) syphilis.

(5) HIV (human immunodeficiency virus) and AIDS (acquired immunodeficiency syndrome). Report to HIV and hepatitis epidemiology program, 1190 St. Francis Dr., N1350, Santa Fe, NM 87502, fax 505-476-3544 or call 505-476-3515.

(a) all confirmed positive HIV antibody tests (screening test plus confirmatory test);
(b) all tests for HIV RNA or HIV cDNA (‘-viral load tests-’);
(c) all tests to detect HIV proteins;
(d) all positive HIV cultures;
(e) all HIV genotype tests;
(f) all CD4 lymphocyte tests (count and percent);
(g) opportunistic infections, cancers and any other test or condition indicative of HIV or AIDS.

(6) Occupational illness and injury. Report to epidemiology and response division, NM department of health, P.O. Box 26110, Santa Fe, NM 87502-6110; or call 505-827-0006.

(a) asbestosis;
(b) coal worker’s pneumoconiosis;
(c) hypersensitivity pneumonitis;
(d) mesothelioma;
(e) noise induced hearing loss;
(f) occupational asthma;
(g) occupational burn hospitalization;
(h) occupational injury death;
(i) occupational pesticide poisoning;
(j) occupational traumatic amputation;
(k) silicosis;
(l) other illnesses or injuries related to occupational exposure.

(7) Health conditions related to environmental exposures and certain injuries. Report to epidemiology and response division, NM department of health, P.O. Box 26110, Santa Fe, NM 87502-6110; or call 505-827-0006.

(a) Environmental exposures:
   (i) all pesticide poisoning;
   (ii) arsenic in urine greater than 50 micrograms/liter;
   (iii) carbon monoxide poisoning;
   (iv) infant methemoglobinemia;
   (v) lead (all blood levels);
   (vi) mercury in urine greater than 3 micrograms/liter or mercury in blood greater than 5 micrograms/liter;
   (vii) uranium in urine greater than 0.2 micrograms/liter or 0.2 micrograms/gram creatinine;
   (viii) other suspected environmentally-induced health conditions.

(b) Injuries:
   (i) drug overdose;
   (ii) firearm injuries;
   (iii) fracture due to fall among older adults;
   (iv) traumatic brain injuries.

(8) Adverse vaccine reactions. Report to vaccine adverse events reporting system, http://www.vaers.hhs.org. Send copy of report to immunization program vaccine manager, NM department of health, P.O. Box 26110, Santa Fe, NM 87502-6110; fax 505-827-1741.

(9) Healthcare-associated infections.

(a) Acute care hospitals only report through NHSN and confer rights to NM department of health.
   (i) central line-associated bloodstream infections (CLABSI) events;
   (ii) clostridium difficile infections.
(b) Report all infections, including non-healthcare-associated, within 24 hours to epidemiology and response division by fax at 505-827-0013 or by phone at 505-827-0006.
(i) carbapenem-resistant enterobacteriaceae*;
(ii) carbapenem-resistant pseudomonas aeruginosa*.

(10) Cancer. Report to designee. Report all malignant and in situ neoplasms and all intracranial neoplasms, regardless of the tissue of origin, using the prevailing standards promulgated by the national cancer institute, the centers for disease control and prevention, the North American association of central cancer registries, and the American college of surgeons.

(11) Human papillomavirus (HPV). Laboratories report the following tests to designee:
(a) papanicolaou test results (all results);
(b) cervical, vulvar and vaginal pathology results (all results);
(c) HPV test results (all results).

(12) Birth defects.
(a) Report to epidemiology and response division, NM department of health, P.O. Box 26110, Santa Fe, NM 87502-6110; or call 505-827-0006.
(b) All birth defects diagnosed by age 4 years, including:
(i) defects diagnosed during pregnancy;
(ii) defects diagnosed on fetal deaths;
(iii) defects found in chromosome testing on amniotic fluid, chorionic villus sampling and products of conception for trisomy 13, trisomy 18 and trisomy 21.

(13) Genetic and congenital hearing screening. Report to children’s medical services, 2040 S. Pacheco, Santa Fe, NM 87505; or call 505-476-8868.
(a) neonatal screening for congenital hearing loss (all results);
(b) suspected or confirmed congenital hearing loss in one or both ears;
(c) all conditions identified through statewide newborn genetic screening;
(d) newborn critical congenital heart defects screening (all results).

[7.4.3.13 NMAC - Rn & A, 7.4.3.12 NMAC, 02/29/2012; A, 06/15/2016]

HISTORY OF 7.4.3 NMAC:
Pre-NMAC History: The material in this part was derived from that previously filed with the commission of public records - state records center and archives:
HSSD 72-3, Regulations Governing The Reporting Of Notifiable Diseases, filed 10/4/72.
HSSD 74-16, Regulations Governing The Reporting Of Notifiable Diseases, filed 7/30/74.
HED-79-4 (HSD), Regulations Governing The Control Of Disease And Conditions Of Public Health Significance, filed 12/20/79.

History of Repealed Material: 7 NMAC 4.3, Control of Disease and Conditions of Public Health Significance (filed 10/31/96), repealed 8/15/2003.
7.4.3 NMAC, Control of Disease and Conditions of Public Health Significance (filed July 31, 2003), repealed 04/30/2009.

Other History:
HED-79-4 (HSD), Regulations Governing The Control Of Disease And Conditions Of Public Health Significance (filed 12/20/79) was renumbered, reformatted, and amended into the first version of the New Mexico Administrative code as 7 NMAC 4.3, Control of Disease and Conditions of Public Health Significance, effective 10/31/96.
7 NMAC 4.3, Control of Disease and Conditions of Public Health Significance, filed 10/16/96 was replaced by the second version of the New Mexico Administrative code as 7.4.3 NMAC, Control of Disease and Conditions of Public Health Significance, effective 8/15/2003.
7.4.3 NMAC, Control of Disease and Conditions of Public Health Significance (filed July 31, 2003) was replaced by 7.4.3 NMAC, Health, Disease Control (Epidemiology), Control of Disease and Conditions of Public Health Significance, effective 04/30/2009.