

## REPORTING REQUIREMENTS

### Why, What and How to Report to the New York City Department of Health and Mental Hygiene

#### Why report?

Clinicians are required by Article 11 of the New York City Health Code to report certain diseases, conditions and events to the New York City Department of Health and Mental Hygiene (NYC DOHMH). Even though laboratories report findings associated with these diseases and conditions, only clinicians can provide the valuable clinical and demographic data that the Department needs to identify and prevent outbreaks and monitor disease trends. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) *does not* affect clinicians' obligations to report conditions specified in the New York City Health Code and provide access to medical records, when needed as part of a public health investigation. The NYC DOHMH protects the confidentiality of information reported by providers.

#### Who must report?

The scope of persons required to report to the Department was broadened in a 2009 amendment to the Health Code to include physicians, dentists, doctors of osteopathy, physician's assistants, nurse practitioners and persons in charge of hospitals and clinics or their designees.

#### What to report?

Conditions that must be reported by clinicians or their designees are specified in the New York City Health Code and posted at <http://www.nyc.gov/html/doh/downloads/pdf/hcp/hcp-reporting.pdf>; please see the list of these conditions that is included in **Attachment 1**. The list reflects amendments to the NYC Health Code that became effective in February 2009: several new diseases and conditions, including Lymphocytic choriomeningitis virus, drownings and Ricin poisoning, were added to reportable conditions; in addition, the disease formerly identified as Ehrlichiosis has been reclassified into two new diseases, Anaplasmosis (Human Granulocytic Anaplasmosis) and Ehrlichiosis (Human Monocytic Ehrlichiosis). Also, food poisoning occurring in two or more people, as opposed to three or more, is now a reportable event.

Health care providers should also be aware that, per Section 11.03 of the New York City Health Code, immediate reporting by telephone is required of a suspected outbreak among three or more persons of *any* disease or condition (whether or not it is listed among reportable conditions) and of any unusual manifestations of disease in an individual.

During times when the Department is monitoring an emerging condition or assessing and responding to an emergency, new reporting requirements or instructions may be issued even before these conditions are defined in the Health Code. So that clinicians remain abreast of emergencies and other situations of public health concern, the Department strongly encourages them to register on NYC MED to receive timely Health Alerts and advisories; these advisories are also sent to hospitals and posted on the NYC DOHMH website. As an

example, the 2009 Health Alert #11, “Swine Influenza Update” is included in **Attachment 2**: this alert was the first sent in response to the introduction of the 2009 pandemic H1N1 influenza virus in NYC in April 2009, and is an example of one which would advise health care providers of a newly emerging disease outbreak and provide information on initial reporting requirements, testing of clinical specimens, and management of suspected and confirmed cases and contacts. This alert was followed by many updates on the pandemic, including guidance for both clinical management and vaccination during the fall of 2009. Instructions on registering for a NYC MED account are given in the “How to report?” section.

### **When to report?**

Certain conditions, as specified in the list of reportable conditions posted at [http://www.nyc.gov/html/doh/downloads/pdf/hcp/hcp\\_reporting.pdf](http://www.nyc.gov/html/doh/downloads/pdf/hcp/hcp_reporting.pdf) and included in **Attachment 1** require immediate reporting by telephone to the Department whether confirmed or suspected. All other reportable conditions must be reported within 24 hours of a confirmed diagnosis.

### **To whom to report?**

*Except for nosocomial outbreaks, physicians need report these conditions only to the NYC DOHMH, not to the New York State Health Department.* The NYC DOHMH is responsible for reporting diseases and conditions for the city to the New York State Health Department; the city is an independent reporting jurisdiction and therefore reports directly to the Centers for Disease Control and Prevention, as well as to the State.

Any nosocomial outbreak or increased incidence of hospital-associated infection, however, must be reported to both the NYC DOHMH and the New York State Health Department, as stated in the Universal Reporting Form instructions. Reports of nosocomial outbreaks should be submitted via the Nosocomial Outbreak Reporting Application (NORA) system located on the NYS Health Provider Network (HPN) at <https://commerce.health.state.ny.us/hpn/infecontrol/forms.html>. The appropriate NYSDOH Regional Epidemiology office or NYC DOHMH office will follow up with the facility making the report. For questions regarding nosocomial reporting, please contact the appropriate NYSDOH Regional Epidemiology office as listed at [http://www.health.state.ny.us/professionals/diseases/reporting/communicable/infection/regional\\_epi\\_staff.htm](http://www.health.state.ny.us/professionals/diseases/reporting/communicable/infection/regional_epi_staff.htm). To reach NYS DOH after hours, call 1-866-881-2809.

### **How to report?**

#### ***Electronic Reporting***

Almost all diseases, conditions and events can be reported to NYC DOHMH via an online system known as Reporting Central (formerly known as the electronic Universal Reporting Form [eURF]).

Registration to access Reporting Central is quick and easy:

1. Enter the NYC MED web address into the browser window:  
<http://www.nyc.gov/nycmed>
2. To create a new user ID, select the link Not yet a user? Click here to register, found on the right side of the page.

3. Enter the required information, indicated by a red asterisk (\*). You will be asked to select a user ID and password.
4. When prompted, be sure to indicate that you need access to the URF (Universal Reporting Form).
5. It is also advisable to elect to be a part of the Health Alert Network (HAN) to receive up-to-date information on urgent and emergent public health situations.
6. Return to the NYC MED web page to confirm user ID and password are functional: <http://www.nyc.gov/nycmed>.

For any user ID/password or login problems, please call 1-888-NYC-MED9.

To enter a disease, condition or event using Reporting Central:

1. After registering as per above instructions, go to <http://www.nyc.gov/nycmed> and enter user ID and password. Choose the Reporting Central link on the left side of the page.
2. Click on the Report a Disease or Condition link and select the disease to be reported from the drop-down list.
3. Complete all required (\*) fields, and other information if known, on each page.
4. After using the Verification Page to confirm that all information was entered accurately, click 'submit'. Receiving an ID number following submission of a report verifies that the report has been successfully received by the Department.

For more detailed instructions on using Reporting Central, send an email request to [eurf@health.nyc.gov](mailto:eurf@health.nyc.gov) or call 212-313-5134.

### ***Paper Reporting***

While the preferred method for reporting to the NYC DOHMH is electronic, paper reports can be submitted in certain circumstances. The Universal Report Form (URF) included in **Attachment 1** is used to notify the Department of almost all communicable conditions for which reporting is mandated, including tuberculosis and sexually transmitted infections, as well as various types of poisonings. The URF includes the mailing address for sending the report in hard copy. The URF may be downloaded from <http://www.nyc.gov/html/hct/hct-urf-shtml>. Health care providers can also call the **Provider Access Line (1-866-NYC-DOH1; 1-866-692-3641)** to have URF forms mailed or faxed to their offices; allow two to three weeks for delivery. The URF *cannot* be used to report HIV/AIDS and known contacts of persons with HIV/AIDS; window falls and animal bites: instructions for reporting these conditions and events are given below.

### ***Reporting immediately, and obtaining consultation, by telephone***

Certain conditions, as designated on the URF form and list of reportable conditions, should be reported immediately by telephone: during normal working hours, health care providers can rapidly report all conditions by calling the **Provider Access Line (1-866-NYC-DOH1/ 1-866-692-3641)**; if a provider needs to report a condition outside of normal working hours, he or she should call the **Poison Control Center (1-212-POISONS/1-212-764-7667)**. *Reporting to the Provider Access Line or to a Department program, however, is not a*

*substitute for reporting in writing or on-line.* If immediate reporting is not required, cases should be reported within 24 hours or on the next working day. Health care providers can also call the **Provider Access Line (1-866-NYC-DOH1; 1-866-962-3641)** to consult with expert medical staff, access the immunization and other DOHMH registries, and obtain information or publications.

## **Reporting considerations relevant to specific conditions and events**

### ***Tuberculosis***

Included in **Attachment 3** is additional information on clinical and laboratory criteria that help define reportable suspected and confirmed tuberculosis cases: this information may also be accessed at

[http://www.nyc.gov/html/doh/downloads/pdf/tb/reporting\\_requirements\\_for\\_tuberculosis.pdf](http://www.nyc.gov/html/doh/downloads/pdf/tb/reporting_requirements_for_tuberculosis.pdf).

The NYC DOHMH Bureau of Tuberculosis Control publishes a Clinical Policies and Protocols Manual which may be accessed at <http://www.nyc.gov/html/doh/downloads/pdf/tb/manu.pdf>.

The Department also maintains a TB Hotline (212-788-4162) for questions related to tuberculosis or latent TB infection.

### ***HIV/AIDS and known contacts of persons with HIV/AIDS***

New York State Public Health Law Article 21, Title III, requires named reporting of diagnoses of HIV and AIDS and all known sex and needle-sharing partners and contacts.

Detailed instructions on how to report a case can be obtained by accessing the NYC DOHMH HIV Epidemiology Program's web site at <http://www.nyc.gov/html/doh/html/dires/hivepi.shtml>

or by calling the program's **HIV Provider Call Line (1-212-442-3388)**. Copies of the **Medical Provider HIV/AIDS and Partner/Contact Report Form (PRF)** that must be used to report HIV/AIDS diagnoses and partner information are included as **Attachment 4**.

The forms can be ordered from the **New York State Department of Health Bureau of HIV/AIDS Epidemiology (1-518-474-4284)** or downloaded at

[http://www.nyc.gov/html/doh/html/dires/hcreporting\\_how.shtml](http://www.nyc.gov/html/doh/html/dires/hcreporting_how.shtml) or

[http://www.nyc.gov/html/doh/downloads/pdf/dires/prf\\_sample.pdf](http://www.nyc.gov/html/doh/downloads/pdf/dires/prf_sample.pdf). For assistance on how to

report a case, use the PRF, or to arrange for collection of a completed PRF by a NYC

DOHMH Public Health Advisor, call the **NYC DOHMH HIV Epidemiology Program** at

**1-212-442-3388**. *Forms may not be mailed, FAXed or e-mailed.* Providers can also call the

NYC Contact Notification Assistance Program (CNAP) at 212-693-1419 for assistance with partner elicitation and notification. If outside of NYC, call the NYS Department of Health's

Partner Notification Assistance Program (PNAP) at 1-800-541-2437.

### ***Animal Bites***

Health care providers must report animal bites immediately, preferably by using Reporting Central, or alternatively by using the Universal Reporting Form or the Form VPHS55 (included in **Attachment 5**), for providers who still have the VPHS55 Form in stock.

Animal bites can be reported on-line at <http://www.nyc.gov/html/doh/html/vet/vetegp.shtml>.

Additionally, animal bites can be reported by calling DOHMH's Animal Bite Unit at

212-676-2483 or 311. For consultation on rabies prophylaxis, health care providers should

call the **Provider Access Line (1-866-NYC DOH1 or 1-866-692-3641)** or, after normal

working hours, the **Poison Control Center (1-212-POISONS/1-764-7667)**.

### *Window Falls*

Falls must be reported by telephone to the **Window Fall Prevention Program** at **1-212-676-2903/2158** during the business hours of 9:00 AM – 5:00 PM Monday to Friday. All reports occurring outside of business hours must be reported by telephone to the **Poison Control Center** at **1-212-POISONS/1-212-764-7667**. After reporting by telephone, first responders (NYPD, FDNY, hospital staff and physicians) must complete and mail a copy of the **Child Window Fall Report** (included in **Attachment 6**); a copy of this report may be faxed to **1-212-442-2629**. A supply of report forms may be requested by calling the Window Fall Prevention Program. Please note that the color of the report form has been changed from blue to yellow.

### **Vital Events**

#### *Terminations of Pregnancy*

The New York City Health Code Article 203 requires that all terminations of pregnancy in New York City, whether they are spontaneous or surgically or medically induced, be reported to the New York City Department of Health and Mental Hygiene within 5 business days after the event. If a permit to dispose of the conceptus is required or requested, the termination of pregnancy certificate must be submitted within 24 hours of the event.

Questions on legal requirements for filing termination of pregnancy certificates should be directed to the Birth and Death Registration Unit at **1-212-788-4545**.

#### *Deaths*

The New York City Health Code Article 205 requires that all deaths occurring in New York City be certified by the reporting physician within 24 hours after the death and registered with the DOHMH within 72 hours after the death. All deaths occurring in the City at facilities reporting 25 or more deaths per year shall be reported to the NYC DOHMH electronically by means of the Electronic Death Registration System (EDRS), as furnished by the NYC DOHMH. All facilities at which fewer than 25 deaths are reported per year may, at their election and upon approval by the NYC DOHMH, implement EDRS or continue to report deaths on approved paper forms. Physicians and administrators should be aware that as of January 1, 2010, all medical facility-based users of the EDRS must complete an e-Learning Module on proper cause of death documentation (accessible at <http://www.nyc.gov/html/doh/media/video/icdr/index.html>). Enforcement of this requirement will be phased in during 2010.

Questions on legal requirements for filing death certificates should be directed to the Birth and Death Registration Unit at **1-212-788-4545**. Questions regarding use and enrollment of EDRS should be directed to **1-212-788-4575**.

#### *Live Births*

The New York City Health Code Article 201 requires that all live births occurring in New York City be reported within 5 business days after the birth. All live births occurring in the City at facilities reporting 100 or more live births per year shall be reported to the NYC

DOHMH electronically by means of the Electronic Vital Events Registration System (EVERS), as furnished by the NYC DOHMH. All facilities at which fewer than 100 live births are reported per year may, at their election and upon approval by the NYC DOHMH, implement EVERS or continue to report births on approved paper forms.

Questions on legal requirements for filing birth certificates should be directed to the Birth and Death Registration Unit at **1-212-788-4545**. Questions regarding use and enrollment of EVERS should be directed to **1-212-788-4575**.

## **Reporting to NYC DOHMH Registries**

### ***Immunizations***

The New York City Health Code (section 11.04 and subsection [d] of 11.07) mandates that health care providers who order the administration of immunizations to children and adolescents from birth through age 18 years in New York City must report the immunizations to the Citywide Immunization Registry (CIR) within 14 days of administration. Immunizations administered to individuals aged 19 years or older may be reported to the CIR, with the patient's written consent. Consent may be obtained by having the patient sign the consent form. See **Attachment 7** for information on reporting to the CIR and relevant fact sheets and forms. As of January 1, 2009, New York City health care providers are required to report immunizations electronically from their own system or to report through the Web-based Online Registry. It should be noted that providers must report to the CIR in order to receive vaccines through the Vaccines for Children Program. Health Care Providers may also use the Online Registry to report immunity to, or history of, vaccine-preventable disease, vaccine adverse events, and blood lead test results. For more information, or to set up on-line access to the CIR for reporting immunizations and/or for obtaining patient or plan member immunization and lead test histories, call **1-212-676-2323**.

Health care providers should be aware that New York State Public Health Law 2168 (posted at [http://www.health.state.ny.us/prevention/immunization/information\\_systems/laws\\_and\\_regulations/public\\_health](http://www.health.state.ny.us/prevention/immunization/information_systems/laws_and_regulations/public_health)) mandates reporting statewide. Under this State law, New York City providers continue to report to the CIR, even if the patient lives outside of New York City. The CIR and NYS Immunization Information System will exchange data regularly on shared patients.

Federal law requires that Vaccine Information Statements be handed out to the patient or authorized individual before any vaccine is administered. Included in **Attachment 7** are the instructions for use of Vaccine Information Statements and for reporting of Vaccine Adverse Events.

### ***Lead Test Results***

The New York City Health Code requires health care providers to report all blood lead levels (BLLs)  $\geq 10\mu\text{g/dL}$  within 24 hours. This prompt notification allows the Lead Poisoning Prevention Program to quickly initiate services. For providers that use a point-of-care device (e.g. *LeadCare*) to analyze blood lead specimens in their office, BLLs  $< 10\mu\text{g/dL}$  must also be reported within 5 days.

Reporting BLL results electronically via the Online Registry is now the preferred method of reporting for children. However, if unable to report electronically, results for children can be faxed to **1-212-676-6326**. Reports of BLLs  $\geq 10\mu\text{g/dL}$  in pregnant women should be faxed to **1-212-676-6386**.

### **School Health Reporting**

Health care providers who see school age children can facilitate their entry into school and improve the continuity of care they receive by timely completion of the following two forms:

- Child and Adolescent Health Examination Form (Please see form included in **Attachment 8**)
- Guidelines for the Provision of Health and Educational Services for students in the New York City Public Schools (This form will be posted on the Department of Education website: <http://schools.nyc.gov/Offices/Health/default.htm>)

A downloadable, pre-completed Child and Adolescent Health Examination Form (211S) with immunization and lead test results already entered can be created by the Citywide Immunization Registry (CIR). Go to <http://www.nyc.gov/health/cir>. A downloadable, blank form can be found at <http://www.nyc.gov/html/doh/downloads/pdf/hcp/hcp-ch205.pdf>.

Parents should receive two copies of completed forms downloaded from the Internet or they may request a duplicate form by contacting the local school.

### **Reporting by Laboratories to the New York City A1C Registry**

Health care providers should be aware that, pursuant to the New York City Health Code, most laboratories are required to report the results of A1C blood tests to the NYC DOHMH. Please see the NYC DOHMH Diabetes Prevention and Control Program website, [www.nyc.gov/health/diabetes](http://www.nyc.gov/health/diabetes), for examples of reports that providers and facilities can receive by enrolling as users of the A1C Registry. Information about the A1C Registry may also be obtained by calling 212-788-4125.

### **Reporting to the New York State Office for Children and Families**

#### **Child Abuse and Neglect/Maltreatment**

New York State Law (Social Services Law, Section 413) requires that any health care professional who suspects (or has reason to suspect) that a child is being endangered or maltreated must report his/her suspicion to the New York State Central Register of Child Abuse and Neglect/Maltreatment (SCR).

Included in **Attachment 9** is information from the Health and Hospital Corporation's *Clinician Guide for Identifying, Treating and Preventing CHILD ABUSE and NEGLECT/ MALTREATMENT* on assessment, documentation and reporting. Some procedures described in the *Guide* maybe adaptable to practice settings outside the Health and Hospital Corporation network.