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# INFECTION PREVENTION AND CONTROL MANUAL

## 7.1 List of Notifiable Diseases

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### NOTIFIABLE DISEASES

| Disease  | Group | Telephone Or Fax Immediately | Post within 5 days | Special Instructions |
|--|-------|------------------------------|--------------------|----------------------|
| Anthrax  | A     | Yes                          | Yes                | -                    |
| Arbovirus Infections - Australian arbo encephalitis  | A     | Yes                          | Yes                | -                    |
| Arbovirus Infections – Barmah Forest Virus           | B     | -                            | Yes                | -                    |
| Arbovirus Infections – Dengue virus                  | B     | -                            | Yes                | -                    |
| Arbovirus Infections – Flavivirus (other)            | B     | -                            | Yes                | -                    |
| Arbovirus Infections – Japanese encephalitis         | A     | Yes                          | Yes                | -                    |
| Arbovirus Infections – Kunjin Virus                  | B     | -                            | Yes                | -                    |
| Arbovirus Infections – Other                         | B     | -                            | Yes                | -                    |
| Arbovirus Infections – Ross River Virus              | B     | -                            | Yes                | -                    |
| Botulism   | A     | Yes                          | Yes                | -                    |
| Brucellosis  | B     | -                            | Yes                | -                    |
| Campylobacteriosis                                   | B     | -                            | Yes                | -                    |
| Chlamydial trachomatis genital infections            | C     | -                            | Yes                | Coded name           |
| Cholera  | A     | Yes                          | Yes                | -                    |
| Cryptosporidiosis                                    | B     | -                            | Yes                | -                    |
| Diphtheria   | A     | Yes                          | Yes                | -                    |
| Donovanosis  | C     | -                            | Yes                | Coded name           |
| Food or water borne illness(2 or more related cases) | A     | Yes                          | Yes                | -                    |
| Giardiasis   | B     | -                            | Yes                | -                    |
| Gonococcal infection                                 | C     | -                            | Yes                | Coded name           |
| Haemolytic uraemic syndrome (HUS)                    | A     | Yes                          | Yes                | -                    |
| Haemophilus influenzae infection (Hib)               | A     | Yes                          | Yes                | -                    |
| Hepatitis viral (not further specified)              | B     | -                            | Yes                | -                    |

| Disease   | Group | Telephone Or Fax Immediately | Post within 5 days | Special Instructions |
|---|-------|------------------------------|--------------------|----------------------|
| Hepatitis A   | B     | -                            | Yes                | -                    |
| Hepatitis B   | B     |                              | Yes                | -                    |
| Hepatitis C   | B     | -                            | Yes                | -                    |
| Hepatitis D   | B     | -                            | Yes                | -                    |
| Hepatitis E   | B     | -                            | Yes                | -                    |
| Influenza (Lab Confirmed)                             | B     | -                            | Yes                | -                    |
| Legionellosis   | A     | Yes                          | Yes                | -                    |
| Leprosy   | B     | -                            | Yes                | -                    |
| Leptospirosis   | B     | -                            | Yes                | -                    |
| Listeriosis   | B     | -                            | Yes                | -                    |
| Lyssa virus – Australian Bat<br>Lyssavirus            | B     | -                            | Yes                | -                    |
| Malaria   | B     | -                            | Yes                | -                    |
| Measles   | A     | Yes                          | Yes                | -                    |
| Meningococcal infection                               | A     | Yes                          | Yes                | -                    |
| Mumps   | B     | -                            | Yes                | -                    |
| Paratyphoid   | A     | Yes                          | Yes                | -                    |
| Pertussis   | B     | -                            | Yes                | -                    |
| Plague  | A     | Yes                          | Yes                | -                    |
| Pneumococcal infection (invasive)                     | B     | -                            | Yes                | -                    |
| Poliomyelitis   | A     | Yes                          | Yes                | -                    |
| Psitacosis (ornithosis)                               | B     | -                            | Yes                | -                    |
| Q fever   | B     | -                            | Yes                | -                    |
| Rabies  | A     | Yes                          | Yes                | -                    |
| Rubella including congenital                          | B     | -                            | Yes                | -                    |
| Salmonellosis   | B     | -                            | Yes                | -                    |
| Shigellosis   | B     | -                            | Yes                | -                    |
| Syphilis (congenital, early, late)                    | C     | -                            | Yes                | Coded name           |
| Tetanus   | B     | -                            | Yes                | -                    |
| Tuberculosis  | B     | -                            | Yes                | -                    |
| Typhoid   | A     | Yes                          | Yes                | -                    |
| Verotoxin-producing<br><i>Escherichia coli</i> (VTEC) | B     | -                            | Yes                | -                    |
| Viral Haemorrhagic Fevers                             | A     | Yes                          | Yes                | -                    |
| Yellow Fever  | A     | Yes                          | Yes                | -                    |

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# INFECTION PREVENTION AND CONTROL MANUAL

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## 7.2 Protocol for reporting a Notifiable Disease

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### RATIONALE

Notifiable infectious diseases must be reported to the Health Department Victoria. The diseases are listed below in Schedule 3 of the Health (Infectious Diseases) Regulations 2001.

In Schedule 3 of the proposed regulations, the notifiable infectious diseases have been classified under four groups, on the basis of the method of notification and the information required.

### GROUP A

Group A diseases have to be notified by telephone or facsimile to institute urgent control measures (to be followed by written notification within 5 days).

### GROUP B

The Group B diseases are those where there is not the same degree of urgency and therefore a written notification is adequate within 5 days of diagnosis.

### GROUP C

Group C diseases are the sexually transmitted diseases. To preclude patient identification, only the first (2) two letters of the given and family name of the patient are required.

Groups A B & C use the same form.

### IN GROUP D

Diseases include HIV infection and AIDS. Written notification is required for any new HIV infection diagnosis and/or any new case of AIDS within 5 days of confirmation of diagnosis. There are separate forms for HIV infection and AIDS, the form to be used has been developed at a national level to provide uniformity and the collection of comparable information from all States.

Copies of this form are available upon request from the Communicable Diseases Section – telephone 1300 651 160.

### SEXUALLY TRANSMITTED DISEASES

Public Health Significance – the notifiable STDs are at present those listed in Group C of Schedule 2 to the Regulations, however, the commonest STDs in Victoria (other than HIV infection) are infections with Chlamydia trachomatis, human papilloma virus (genital warts) and genital herpes virus.

Specific Victorian Statutory Requirements – Group C notification.

The Medical Practitioner attending the patient has the following powers and duties:

## **PATIENT**

### **Investigation:**

Arrange for laboratory confirmation of infection where possible.

(DHS Responsibility)

Enquire into sexual contacts and stress the importance of tracing them to find the source of infection and to prevent further transmission.

### **Control: (Medical Officer)**

Treat with appropriate medication, at the correct dose and for an adequate period of time to eradicate the microorganism.

Warn that there is a legal responsibility not to infect others.

## **CONTACTS (DHS)**

### **Investigation:**

If patient is unwilling or unable to contact sexual partner(s) seek advice from Director, Melbourne STD Clinic.

## **HOW DO I NOTIFY?**

The Department provides reprinted forms and Reply Paid envelopes (no stamp required) available at the Public Health internet site ([www.dhs.vic.gov.au](http://www.dhs.vic.gov.au)) and telephone and facsimile numbers (local call cost only) to make notifying as simple as possible. Or telephone the Communicable Diseases Section on 03 96374126. The Privacy Unit can be contacted by telephoning 0396167777.

**All notifications and related inquiries should be directed to:**

**Communicable Disease Section**

**Victorian Government**

**Department of Human Services**

**Reply Paid 65937, MELBOURNE VIC 8060**

**Telephone: 1300 651 160**

**Facsimile: 1300 651 170**

### **After Hours**

**Contact the Duty Medical Officer via pager service 13 22 22 and quote pager number: 46870**

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### **REFERENCE:**

Notification of Infectious Disease form, August 2002

Public Health Division / Department of Human Services Notifying Cases of Infectious Diseases within Victoria 2001.