

## Follow-up of Single Cases of Reportable Communicable Diseases

Condition	Indiv. Cases		Type of Follow up / Comments
	Need F/U	Responsibility	
<b>Vaccine-Preventable Diseases</b>			
Diphtheria	Yes	S, L	Pt interview; contact invest; case Rx; contact Rx & vax* <b>immediate response*</b>
Hepatitis B – acute	Yes	L <sup>+</sup> , S	*Some LHDs conduct regular F/U; Pt interview; contact invest/referral
Hepatitis B – chronic	Yes	S, L	Pt interview of selected cases (<18 years, pregnant women, 18-25 year olds, and all refugees); vax for contacts of pregnant cases
Measles	Yes	L, S	Pt interview; contact invest; contact vax <b>*immediate response*</b>
Mumps	Yes	L, S	Pt interview; contact invest & vax
Pertussis	Yes	L, S	Pt interview; case Rx; contact invest; contact Rx & vax <b>*immediate response*</b>
Poliomyelitis	Yes	S, L	Pt interview; contact invest; notify CDC <b>*immediate response*</b>
Rubella	Yes	L, S	Pt interview; contact invest; contact vax <b>*immediate response*</b>
Rubella – congenital	Yes	L, S	Pt interview; contact invest; contact vax
Smallpox	Yes	S, L	Pt interview; contact invest; contact vax <b>*immediate response - R/O BT*</b>
Tetanus	Yes	L, S	Pt interview; case Rx

**Note:** The order of the listings in the ‘Responsibility’ column indicates, in general, whether the local jurisdiction or the state should have “primary” responsibility or “take the lead” on follow-up of a particular disease.

**Abbreviations**

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[January 2012]

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<b><i>Vaccine-Preventable Diseases</i></b> <i>(continued)</i>			
Varicella	NO		Investigate selected outbreaks
<b><i>Foodborne/Enteric Diseases</i></b>			
Botulism	Yes	S, L	Pt interview; <b>*immediate response*</b>
Botulism - infant	Yes	S	CDPHE facilitates Rx and lab testing <b>*immediate response*</b>
Campylobacter	Yes	L	Pt interview (confirmed, probable, and selected suspect cases)
Cholera	Yes	S, L	Pt interview; contact invest <b>*immediate response*</b>
Clostridium difficile	NO		CDPHE chart review for 5-county Denver area
Cryptosporidium	Yes	L	Pt interview
Cyclospora	Yes	L	Pt interview
Giardia	Yes	L	Pt interview
Hemolytic uremic syndrome <18yrs	Yes	L, S	Pt interview
Hepatitis A	Yes	L, S	Pt interview; contact invest; contact Rx <b>*immediate response*</b>
Listeria	Yes	L	Pt interview
Salmonella	Yes	L	Pt interview

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<b><i>Foodborne/Enteric Diseases</i></b> <i>(continued)</i>			
Shigella	Yes	L	Pt interview
STEC (Shiga toxin producing E. coli)	Yes	L	Pt interview
Trichinosis	Yes	L	Pt interview
Typhoid Fever	Yes	L, S	Pt interview; contact invest <b>*immediate response*</b>
Vibrios, non-cholera	Yes	L	Pt interview
Yersinia, non-pestis	Yes	L <sup>+</sup>	+ 7-county Denver metro only; Pt interview
<b><i>Invasive Bacterial Diseases</i></b>			
Group A streptococcus	NO		CDPHE chart review for 5-county Denver area
Group B streptococcus	NO		CDPHE chart review for 5-county Denver area
Haemophilus influenzae	Yes	L, S	Pt interview; contact invest; contact Rx & vax for type B (Hib) <b>*immediate response for type B*</b>
MRSA	NO		CDPHE chart review for 5-county Denver area
Meningococcal Disease	Yes	L, S	Pt interview; contact invest; contact Rx <b>*immediate response*</b>
Pneumococcal Disease	Yes	L <sup>+</sup> , S	+ <u>Outside</u> 5-county Denver metro area only; Vax history for cases < 5yrs (CDPHE chart review for 5-county Denver area)

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## Follow-up of Single Cases of Reportable Communicable Diseases

Condition	Indiv. Cases		Type of Follow up / Comments
	Need F/U	Responsibility	
<b>Zoonotic Diseases</b>			
Animal bites - domestic animals	Yes	AC, L	Refer reports to local animal control agency
Animal bites – wild animals	Yes	L, S, AC	Pt interview; animal testing; contact vax
Anthrax	Yes	S, L	Pt interview; env invest <b>*immediate response - r/o BT*</b>
Brucellosis	Yes	S, L	Pt interview; env invest; r/o BT
Hantavirus	Yes	L,S	Pt interview; env invest
Lyme Disease	Yes	S, L	Pt interview
Malaria	Yes	S, L	CDC surveillance form to provider
Plague	Yes	S, L	Pt interview; contact/env invest; contact Rx <b>*immediate response - r/o BT*</b>
Psittacosis	Yes	S, L	Pt interview; env invest; contact invest
Q Fever	Yes	S, L	Pt interview; env invest; r/o BT
Rabies (human)	Yes	S, L	Pt interview; contact invest; contact vax <b>*immediate response*</b>
Relapsing Fever	Yes	S, L	Pt interview; env invest; contact invest & Rx
Rocky Mountain Spotted Fever	Yes	S, L	Pt interview
St. Louis encephalitis	Yes	L, S	Pt interview
Tularemia	Yes	S, L	Pt interview; env invest; r/o BT

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<b>Zoonotic Diseases (continued)</b>			
Western Equine Encephalitis	Yes	L, S	Pt interview
West Nile Virus	Yes	L	Pt interview
<b>Other Diseases</b>			
Aseptic meningitis	NO		Investigate selected outbreaks
Hepatitis C – acute	Yes	L <sup>+</sup> , S	*Some LHDs conduct regular F/U; Pt interview; contact invest/referral
Hepatitis C – chronic	NO		Some LHDs provide educational and prevention information and referral to cases classified as “ <b>Confirmed</b> ” by CDPHE, State provides follow-up (and limited pt interviews) on “ <b>confirmed and probable</b> ” 18-25 and 40-45 year old male and female cases, and all refugee cases
Influenza hospitalizations	NO		CDPHE chart review for 5-county Denver area
Influenza-associated pediatric deaths	Yes	S, L	Vax history & chart review
Kawasaki Syndrome	Yes	S	CDC surveillance form to provider
Legionnaire's Disease	Yes	L, S	Pt interview or request chart info; complete CDC case report form
Leprosy (Hansen's Diseases)	Yes	S, L	Refer for Rx; assess household contacts
SARS	Yes	L, S	Pt interview; contact invest; contact monitoring <b>*immediate response*</b>

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Toxic Shock Syndrome	Yes	S	CDPHE chart review
Vancomycin-resistant/int. S. aureus	Yes	S, L	Chart review, contact invest

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