

# The Epi Link

Monthly Update and  
Newsletter

## Reporting of Notifiable Conditions: Who, How and Why?

The Texas Health and Safety Code requires specific information regarding notifiable conditions be reported for any **suspected** or **laboratory confirmed** conditions.

- Reporting is required from any physician, dentist, advanced practice nurse, physician assistant, as well as others who suspect a notifiable condition in the state of Texas.
- While many of our local labs are diligent about reporting, there is always a possibility of technology failure and human error which can result in conditions not being reported or being reported late.
- Provider reporting ensures:
  - Each report is investigated and control measures are implemented
  - Public health and environmental health professionals can investigate any potential hazardous exposure
  - Prevention of the spread of illness whether that leads to investigation of another patient, a significant food exposure, or a venue exposure
- Go here for the current list of State Notifiable Conditions: <http://www.dshs.texas.gov/idcu/investigation/conditions/>

### Reporting by Fax

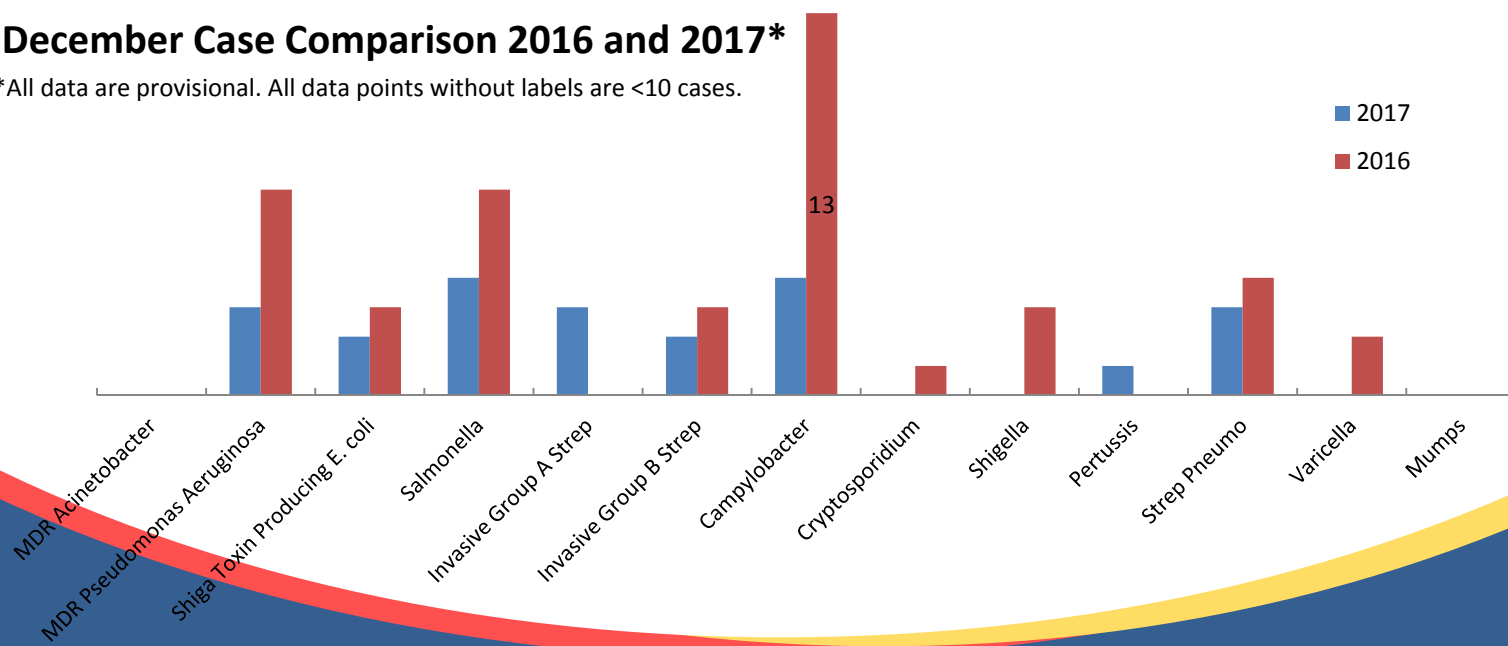
- Gather patient demographics, relevant labs, and office notes
- Fax all information with a coversheet to 806-378-6306
  - Attn: Communicable Disease

### Reporting by Phone

- Laurie Burton, BSN, RN - Program Manager
  - 806-378-6321
- Kirstin Williams, MPH – Epidemiologist
  - 806-378-6353

### December Case Comparison 2016 and 2017\*

\*All data are provisional. All data points without labels are <10 cases.



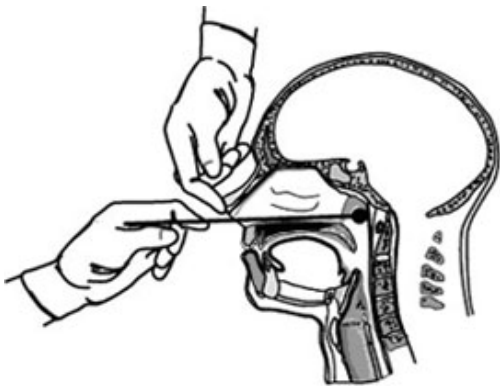
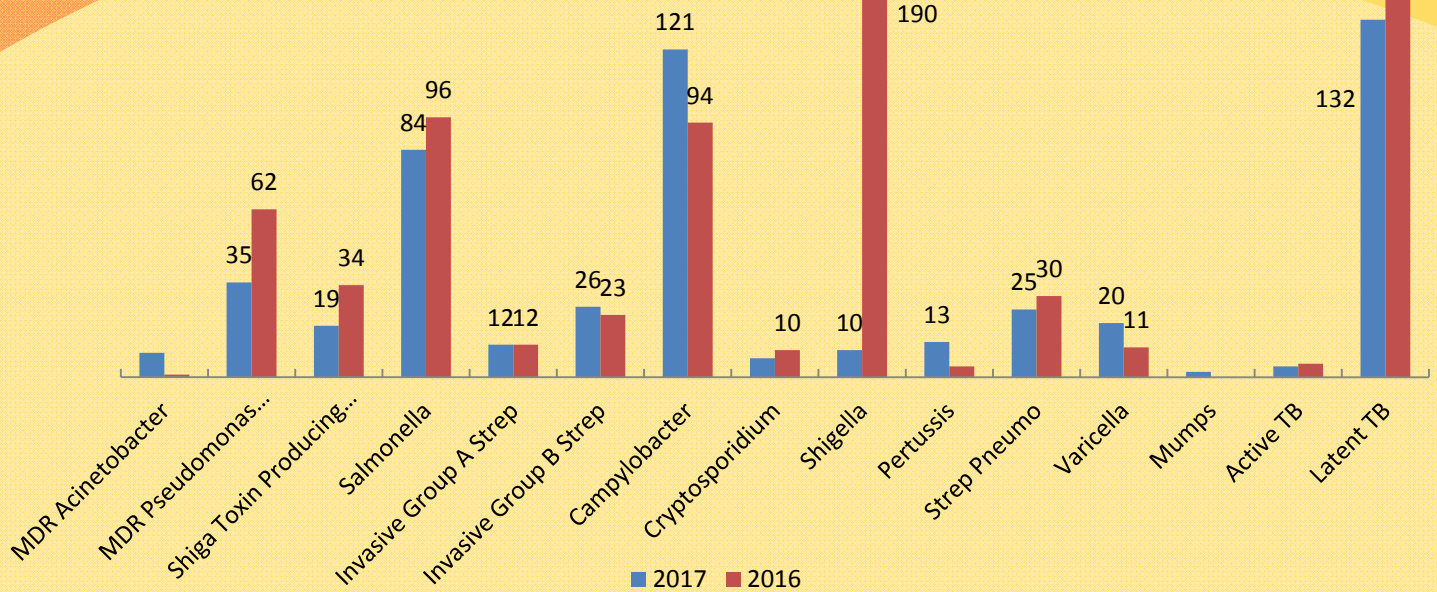
Does your staff need a refresher on placing and reading TB skin tests? We can help!

Call Phyllis or Haley at 806-378-6300

## 2016-2017 Case Count Comparison of Selected Illness\*

\*All data are provisional. All data points without labels are <10 cases

\*\*TB data are from patients treated or seen at COA Public Health



### Nasopharyngeal Swab Technique

Please consider *Pertussis* or *Whooping Cough* for any patient who has had a cough **lasting longer than two weeks**.

When testing for Pertussis, the best test is **PCR for *Bordetella pertussis***, using a “mini-tip” Rayon or Dacron nasopharyngeal swab with aluminum or plastic handles.

For more information:

- <https://www.cdc.gov/pertussis/clinical/diagnostic-testing/specimen-collection.html>
- <http://www.dshs.texas.gov/IDCU/investigation/electronic/Pertussis.pdf>

- Immobilize the patient's head.
- Gently insert nasopharyngeal swab into a nostril until the posterior nares is reached.
- Leave the swab in place for up to 10 seconds. This procedure may induce coughing and tearing.
- If resistance is encountered during insertion of the swab, remove it and attempt insertion on the opposite nostril.
- Remove the swab slowly.
- After collection, the swab should be inserted back into the dry transport tube. Store at 2-8°C until shipment at refrigerated temperature (2-8°C).

