

2011

# LABORATORY REPORTING OF NOTIFIABLE CONDITIONS

MAINE CENTER FOR DISEASE CONTROL AND PREVENTION

# IMPORTANT PHONE NUMBERS

## Disease Reporting and Consultation Line

800-821-5821

Healthcare Associated Infections Program

207-287-6028

207-287-8186 (fax)

HIV, STD and Viral Hepatitis Program

207-287-3747

207-287-3498 (fax)

Immunization Program

207-287-3746

207-287-8127 (fax)

Infectious Disease  
Epidemiology Program

800-821-5821

800-293-7534 (fax)

Tuberculosis Control Program

207-287-5194

800-293-7534 (fax)

## Health and Environmental Testing Laboratory (HETL)

207-287-2727

Bacteriology Section

207-287-1704

Molecular/PulseNet Section

207-287-6366

TB/Mycology Section

207-287-1706

Virology Section

207-287-1722

## Northern New England Poison Control

800-222-1222



# A NOTE TO OUR COLLEAGUES

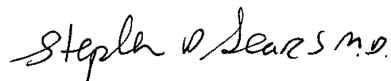
Maine Center for Disease Control and Prevention (Maine CDC) is pleased to provide you with this guidance for laboratory reporting of notifiable conditions. We hope you find this guidance useful.

Reporting of suspected or confirmed diseases or conditions designated as notifiable is mandated under Maine State Law [22 M.R.S.A., Chapter 250, §820 and §822]. Though the primary responsibility of reporting lies with health care providers, the following entities are also required to report notifiable diseases in Maine: medical laboratories (including blood donor centers and blood banks), veterinarians, veterinary medical laboratories, health care facilities, child care facilities, correctional facilities, educational institutions, and local health officers.

In an effort to assist medical laboratories and blood banks in fulfilling these obligations, Maine CDC has developed this guidance for laboratory reporting. This reference provides Maine-specific information on notifiable diseases and conditions, contact information for key personnel and offices, and emergency contact information for after hours calls.

If you require further information or if you have questions or concerns about disease reporting, please call Maine CDC's 24-hour Disease Reporting and Consultation Line at **800-821-5821**. If you would like additional copies of this guidance, a PDF version is available on Maine CDC website at [www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/](http://www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/) or can be ordered by calling 800-821-5821.

Partnering for Prevention,

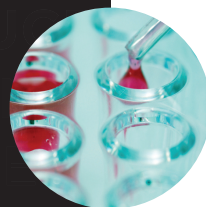
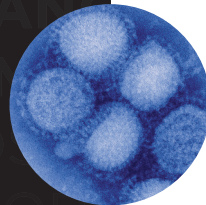


**Stephen D. Sears, MD MPH**  
State Epidemiologist  
Maine Center for Disease Control and  
Prevention



**Kenneth G. Pote, Ph.D.**  
Director, Maine Health and  
Environmental Testing Laboratory  
Maine Center for Disease Control  
and Prevention

# FREQUENTLY ASKED QUESTIONS



- Q. Are laboratories and blood banks required to report notifiable conditions?**
- A.** Yes, Maine State Law [22 M.R.S.A., Chapter 250, §820 and §822] requires laboratories and blood banks to immediately report the recognition or strong suspicion of the notifiable conditions indicated in this guidance to public health authorities at Maine Center for Disease Control and Prevention (Maine CDC).
- Q. To whom should reports of positive lab results or other markers of disease be submitted?**
- A.** All reports should be submitted to Maine CDC. The reports may be made by calling the 24-hour Disease Reporting and Consultation Line at 800-821-5821 or by faxing the report to 800-293-7534.
- Q. When and how should reports be submitted?**
- A.** Category I notifiable conditions, as indicated by the bold text and phone icon on the Reporting Procedures List contained in this guidance, must be reported immediately by telephone on recognition or strong suspicion of disease. Category II, non bolded, notifiable conditions require reporting by telephone, fax, or mail as soon as possible, but no later than 48 hours from the time of recognition or strong suspicion of disease. Although telephone and fax should be the primary method of reporting, in the case of Category II conditions written reports may be mailed to Maine Center for Disease Control and Prevention, Division of Infectious Disease, 11 State House Station, Augusta, ME 04333-0011.
- Q. What information should be provided to the public health authorities?**
- A.** Disease reports must include all pertinent information including: disease or condition diagnosed or suspected; patient's name, date of birth, address, phone number, occupation, and race; diagnostic laboratory findings and dates of test relevant to the notifiable condition; health care provider name, address, and phone number; and name and phone number of the person making the report. A disease report form is available for download at [www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/notifiable-form.doc](http://www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/notifiable-form.doc).

**Q. How can positive test results be confirmed?**

**A.** The Maine Health and Environmental Testing Laboratory (HETL), in Augusta, is available to assist clinical laboratories in the identification of isolates of etiologic agents of notifiable diseases and/or confirm the presence of serologic markers of such diseases.

**Q. What is required to be submitted to HETL?**

**A.** The Reporting Procedures Table in this guidance contains information about which agents are required by state law to be submitted to HETL. Many clinical laboratories utilize the services of reference laboratories at their discretion. State law requires that test results that relate to notifiable conditions, noted as “Yes” in the “Lab Submission of Isolates or Specimens for Confirmation Required” column, must be submitted to HETL, regardless of where the test is performed. Maine laboratories participating in the Federal Laboratory Response Network (LRN) are also required to submit isolates or specimens when specific agents are suspected. For more information please visit the HETL website at [www.mainepublichealth.gov/lab](http://www.mainepublichealth.gov/lab).

**Q. Does Maine HETL participate in any special testing?**

**A.** Yes. Maine HETL participates in PFGE/PulseNET, CaliciNET and Laboratory Response Network (LRN).

PFGE/PulseNET is a network of public health laboratories from the United States and Canada that strain type bacteria using pulsed field gel electrophoresis (PFGE). PulseNET allows the linkage of cases and foodstuffs to outbreaks using an electronic database of DNA fingerprints from pathogenic bacteria including shigatoxin producing E.coli, Salmonella, Shigella, Campylobacter and Listeria. For more information visit: [www.cdc.gov/pulsenet/](http://www.cdc.gov/pulsenet/).

CaliciNET is a network of public health laboratories from the United States and Canada that perform DNA sequencing by Polymerase Chain Reaction (PCR) on noroviruses isolated from clinical specimens or food stuffs to determine relatedness and genetic variability. Information from CaliciNET can aid in the identification of novel norovirus strains and provide valuable information during outbreaks. For more information: [www.cdc.gov/ncidod/dvrd/revb/gastro/norovirus-factsheet.htm](http://www.cdc.gov/ncidod/dvrd/revb/gastro/norovirus-factsheet.htm)

LRN is a national network of local, state and federal public health, hospital-based, food testing, veterinary and environmental testing laboratories that provide laboratory diagnostics. The LRN and its partners’ mission is to maintain an integrated national and international network of laboratories that can respond quickly to acts of chemical or biological terrorism, emerging infectious diseases and other public health threats and emergencies.

**Q. Are physicians required to report notifiable conditions too?**

**A.** Yes, physicians are required to report notifiable diseases to Maine CDC. Information is collected on disease onset, symptoms, treatment, occupation, illness in family members, hospitalization, etc. and supplements the information reported by medical laboratories. Immediately reportable conditions, as indicated by the bolded text and phone icon on the Reporting Procedures List contained in this guidance, should be reported immediately upon clinical suspicion.

**Q. Is electronic laboratory reporting of test results available?**

**A.** Yes, electronic laboratory reporting to Maine CDC is available. Currently Maine CDC receives electronic laboratory reports from some national reference laboratories and HealthInfoNet. Category I conditions must be reported immediately by telephone upon recognition or strong suspicion of disease prior to availability of test results. Telephone reporting of conditions and paper-based electronic laboratory reporting are still utilized. For more information about implementing electronic laboratory reporting, call the Disease Reporting and Consultation Line at 800-821-5821.

**Q. Is reporting required for donor testing?**






**A.** Yes, blood banks, tissue banks and organ procurement organizations must report positive results of notifiable conditions to Maine CDC.








**Q. Are HIV related tests reportable?**

**A.** Yes, all confirmed positive HIV antibody tests, all results of viral load tests, and all results of CD4 lymphocyte counts are reportable. Reports can be submitted by telephone to 800-821-5821, by fax to 207-287-3498, or by mail to Maine Center for Disease Control and Prevention, HIV Surveillance, 286 Water Street, 11 State House Station, Augusta, ME 04330-0011.

# REPORTING PROCEDURES

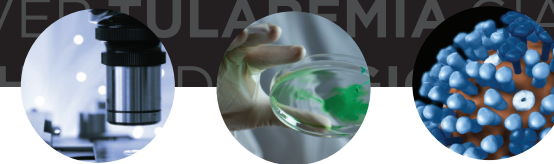






AGENT	DISEASE/CONDITION	WHAT TO REPORT TO MAINE CDC	LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED	TESTING PERFORMED AT HETL
<i>Anaplasma phagocytophilum</i>	Anaplasmosis	Positive by any method	No	
 <b>Arboviruses:</b> Eastern or Venezuelan equine encephalitis, Powassan virus, St. Louis encephalitis, West Nile virus	Arboviral infection, viral encephalitis/meningitis	Positive viral culture, NAAT or serologic evidence for any of the arboviruses	No (not required but requested)	IgM performed for Eastern equine encephalitis, St. Louis encephalitis, West Nile virus  Powassan virus tested at Federal CDC
 <b>Arenaviruses</b> (Lassa, Junin)	Viral hemorrhagic fever	Positive by any method	No	Confirmatory testing will be performed by Federal CDC
<i>Babesia microti</i>	Babesiosis	Positive blood smear, NAAT or serologic evidence, PCR	No	
 <b>Bacillus anthracis</b>	Anthrax	Positive by any method	<b>Yes</b>	PCR, culture Reportable by LRN
 <b>Bordetella pertussis</b>	Pertussis	Positive by any method	<b>Yes</b>	PCR, culture
<i>Borrelia burgdorferi</i>	Lyme disease	ELISA positive or equivocal; Immunoblot positive or equivocal	No	
 <b>Brucella spp.</b>	Brucellosis	Positive by any method	<b>Yes</b>	PCR, culture Reportable by LRN
<i>Burkholderia mallei</i>	Glanders	Positive by any method	<b>Yes</b>	PCR, culture Reportable by LRN
<i>Burkholderia pseudomallei</i>	Melioidosis	Positive by any method	<b>Yes</b>	PCR, culture Reportable by LRN
<i>Campylobacter spp.</i>	Campylobacteriosis	Positive by any method	No	PCR, culture, PFGE
<i>Carbon Monoxide</i>	Carbon Monoxide Poisoning	Carboxyhemoglobin (COHb) level $\geq 5\%$	No	
<i>Chlamydia psittaci</i>	Psittacosis	Positive culture or serologic evidence	No	

AGENT	DISEASE/CONDITION	WHAT TO REPORT TO MAINE CDC	LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED	TESTING PERFORMED AT HETL
<i>Chlamydia trachomatis</i>	<i>Chlamydia trachomatis</i> , all genital infections including lymphogranuloma venereum (LGV) and eye infections	Positive by any method	No	NAAT
 <b><i>Clostridium botulinum</i></b>	Botulism	Positive culture or toxin in blood or stool	<b>Yes</b>	ELISA Reportable by LRN
 <b><i>Clostridium tetani</i></b>	Tetanus	Positive culture	<b>Yes</b>	Culture
 <b><i>Corynebacterium diphtheriae</i></b>	Diphtheria	Positive culture	<b>Yes</b>	Culture, DNA sequencing
 <b><i>Coxiella burnettii</i></b>	Q fever	Positive by any method	<b>Yes</b>	PCR Reportable by LRN
Creutzfeldt-Jakob agent	Creutzfeldt-Jakob Disease	Positive by any method in patients younger than 55 years of age	No	
 <b><i>Cryptosporidium spp.</i></b>	Cryptosporidiosis	Positive by any method	No	PCR
<i>Cyclospora</i>	Cyclosporiasis	Positive by any method	No	
<i>Ehrlichia chaffeensis</i>	Ehrlichiosis	Positive by any method	No	
<i>Entamoeba histolytica</i>	Amebiasis	Positive by any method	No	
<i>Escherichia coli</i> , Shiga toxin producing	Shiga toxin-producing <i>E. coli</i> (STEC) disease	Positive shiga toxin in stool	<b>Yes</b>	PCR O157:H7/Shiga toxin1/Shiga toxin2, culture, PFGE
<i>Escherichia coli</i> O157	<i>E. coli</i> O157 disease including hemolytic-uremic syndrome(HUS)	Positive <i>E. coli</i> O157 culture, positive shiga toxin in stool	<b>Yes</b>	Culture, PFGE, PCR O157:H7/Shiga toxin1/Shiga toxin2
 <b>Filoviruses</b> (Ebola, Marburg)	Viral hemorrhagic fever	Positive by any method	<b>Yes</b>	Reportable by LRN
 <b><i>Francisella tularensis</i></b>	Tularemia	Positive by any method	<b>Yes</b>	PCR, culture Reportable by LRN
<i>Giardia lamblia</i>	Giardiasis	Positive by any method	No	
<i>Haemophilus ducreyi</i>	Chancroid	Positive by any method	No	
<i>Haemophilus influenzae</i>	<i>Haemophilus influenzae</i> , invasive disease	Positive by any method	<b>Yes</b>	Serogroup identification








See inside back cover for key of abbreviations.

# REPORTING PROCEDURES

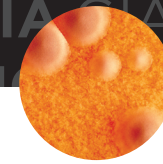
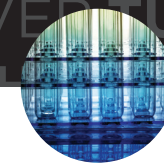








AGENT	DISEASE/CONDITION	WHAT TO REPORT TO MAINE CDC	LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED	TESTING PERFORMED AT HETL
Hantavirus	Hantavirus Pulmonary Syndrome	Positive IgM or rising IgG titer or positive RNA by NAAT or positive immunochemistry	No	Confirmatory testing recommended
 <b>Hepatitis A virus</b>	Hepatitis A	Positive serology for IgM anti-HAV	No	
 <b>Hepatitis B virus</b>	Hepatitis B	Positive serology for HBsAg, anti-HBc, IgM anti-HBc, HBeAg or HBV DNA (positive or detectable).	No	EIA
 <b>Hepatitis C virus</b>	Hepatitis C	Positive serology for anti-HCV EIA or CIA, anti-HCV RIBA; Positive or detectable HCV RNA (PCR, bDNA, TMA), Genotype, and ALT >400 IU/L (in combination with one or more positive or detectable HCV result).	No	EIA
<i>Human Immunodeficiency Virus</i>	HIV and AIDS	Positive results confirmed by supplemental HIV antibody test (e.g. Western blot, IFA), detectable quantities from all HIV nucleic acid detection test results, positive HIV p24 antigen test (including neutralization assay), positive HIV isolation (viral culture). All CD4 counts and viral load test results regardless of quantity or detection levels should be reported by reference laboratories.  Causative organisms responsible for AIDS defining conditions. <a href="http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5710a2.htm">www.cdc.gov/mmwr/preview/mmwrhtml/rr5710a2.htm</a>	<b>Yes</b> — only applies to HIV antibody test results	Western Blot, EIA
 <b>Influenza, novel</b>	Influenza, novel	Positive influenza A, unable to serotype or novel strain	<b>Yes</b>	PCR screening A/B and PCR subtyping H1N1, H3N2, H5, culture, Drug Resistance by Pyrosequencing (2009 H1N1) (Available in 2010-11 season)
<i>Legionella spp.</i>	Legionellosis	Positive by any method	No	
<i>Leptospira interrogans</i>	Leptospirosis	Positive by any method	No	PCR, culture, PFGE






AGENT	DISEASE/CONDITION	WHAT TO REPORT TO MAINE CDC	LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED	TESTING PERFORMED AT HETL
<i>Listeria monocytogenes</i>	Listeriosis	Positive by any method	<b>Yes</b>	PCR, culture, PFGE
 <b>Monkeypox Virus</b>	Monkeypox	Positive by any method	<b>Yes</b>	PCR Reportable by LRN
 <b>Mumps virus</b>	Mumps	Paired sera showing rising IgG titer, single serum showing mumps IgM antibody, positive viral culture, RT-PCR	<b>Yes</b>	IgG serology, RT-PCR, culture, IgM, ELISA
 <b><i>Mycobacterium tuberculosis</i></b>	Tuberculosis	Positive AFB smear (including subsequent culture result), or historic evidence of disease (Negative culture results on follow up specimens must also be reported)  Clinical suspicion of active disease	<b>Yes</b>	AFB smear, NAAT probe, culture, drug susceptibilities, genotyping, IGRA (Available 12/1/2010)
<i>Neisseria gonorrhoeae</i>	Gonorrhea, Gonococcal conjunctivitis	Positive by any method	No	NAAT, culture, DFA
 <b><i>Neisseria meningitidis</i></b>	Meningococcal disease, Invasive	Positive by culture from any sterile site (such as blood or CSF) or Gram-stain showing Gram-negative diplococci in CSF or blood	<b>Yes</b>	PCR, culture, serotyping
Norovirus	Norovirus	Positive by any method	<b>Yes</b> , for outbreaks and at the request of Maine CDC	RT-PCR GI/GII, DNA sequencing (Calicinet)
Saxitoxin, domoic acid	Paralytic Shellfish Poisoning	Positive by any method	No	Confirmatory testing may be facilitated in collaboration with Department of Marine Resources
<i>Plasmodium spp.</i>	Malaria	Positive blood smear or NAAT	No	
 <b>Polio virus</b>	Poliomyelitis	Positive viral culture or NAAT	<b>Yes</b>	Confirmatory testing will be performed by Federal CDC
 <b>Rabies virus, animal</b>	Rabies	Domestic animal or human exposure to either high risk wildlife or domestic animals	<b>Yes</b> , if indicated after consultation with Maine CDC	DFA
 <b>Rabies virus, human</b>	Rabies	Clinical symptoms consistent with human Rabies virus	<b>Yes</b>	Confirmatory testing will be performed by Federal CDC

# REPORTING PROCEDURES



AGENT	DISEASE/CONDITION	WHAT TO REPORT TO MAINE CDC	LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED	TESTING PERFORMED AT HETL
 <b>Ricin Poisoning</b>	Ricin Poisoning	Positive by any method	<b>Yes</b>	PCR, TRF-ELISA Reportable by LRN
<i>Rickettsia rickettsii</i>	Rocky Mountain Spotted Fever	Positive by any method	No	
 <b>Rubella virus</b>	Rubella (German Measles), including congenital	Paired sera showing rising IgG titer, single serum showing rubella IgM antibody, positive viral culture, RT-PCR	<b>Yes</b>	IgG Serology Confirmatory testing will be performed by Federal CDC
 <b>Rubeola virus</b>	Measles	Paired sera showing rise in IgG titer, single serum showing measles IgM antibody, positive viral culture, RT-PCR	<b>Yes</b>	IgG Serology, RT-PCR
<i>Salmonella</i> species including typhi	Salmonellosis including Typhoid fever	Positive culture	<b>Yes</b>	Culture, PFGE, serotyping
 <b>SARS Coronavirus</b>	Severe Acute Respiratory Syndrome (SARS)	Positive by any method	<b>Yes</b>	Confirmatory testing will be performed by Federal CDC
<i>Shigella spp.</i>	Shigellosis	Positive culture	<b>Yes</b>	Culture, serogrouping, PFGE
<i>Staphylococcus aureus</i>	Methicillin-resistant <i>Staphylococcus aureus</i> , invasive	Positive culture from any sterile site (such as blood or CSF)	No	
 <b>Staphylococcus aureus</b>	Staphylococcal disease, Vancomycin intermediate (VISA) or Vancomycin resistant (VRSA)	Positive culture from any site	<b>Yes</b>	MecA gene confirmation and vanA gene detection by Federal CDC
 <b>Staphylococcal enterotoxin B</b>	Staphylococcal enterotoxin B poisoning	Positive for toxin in blood or urine by any method	No	TRF-ELISA Reportable by LRN
<i>Streptococcus agalactiae</i> (Group B Strep)	Group B streptococcal invasive disease	Positive culture from any sterile site (such as blood or CSF)	No	

AGENT	DISEASE/CONDITION	WHAT TO REPORT TO MAINE CDC	LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED	TESTING PERFORMED AT HETL
<i>Streptococcus pneumoniae</i>	<i>Streptococcus pneumoniae</i> invasive disease	Positive culture from any sterile site (such as blood or CSF), antibiotic susceptibility pattern must be included	No	
<i>Streptococcus pyogenes</i> (Group A Beta Hemolytic Strep)	Group A streptococcal invasive disease	Positive culture from any sterile site (such as blood or CSF), or any surgically-obtained site, or any site.	No	
<i>Treponema pallidum</i>	Syphilis	Positive by any method including RPRs	<b>Yes</b>	TPPA, RPR, VDRL (CSF only)
<i>Trichinella spp.</i>	Trichinosis	Positive biopsy or serology	No	
Vaccinia virus	Vaccinia infection	Positive by any method	<b>Yes</b>	PCR Reportable by LRN
<i>Varicella-zoster virus</i>	Chicken pox, Shingles	Positive by any method	No	PCR
 <b>Variola virus</b>	Smallpox	Positive by any method	<b>Yes</b>	Confirmatory testing will be performed by Federal CDC
<i>Vibrio spp.</i> , including cholera	Vibriosis, including cholera	Positive by any method	<b>Yes</b>	PCR (cholera only), culture, serogrouping
Yellow fever virus	Yellow fever	Positive by any method	No	
<i>Yersinia pseudotuberculosis</i> and <i>Yersinia enterocolitica</i>	Yersiniosis	Positive culture	No	
 <b>Yersinia pestis</b>	Plague	Positive by any method	<b>Yes</b>	PCR, culture Reportable by LRN

 Diseases/conditions indicated with the phone icon must be immediately reported by telephone to the Maine CDC (800-821-5821).

**AFB** Acid-fast Bacillus

**CIA** Chemiluminescence Immunoassay

**COHb** Carboxyhemoglobin

**CSF** Cerebrospinal Fluid

**DFA** Direct Fluorescent Antibody

**EIA** Enzyme Immunoassay

**ELISA** Enzyme-linked Immunosorbent Assay

**HAV** Hepatitis A Virus

**HBc** Hepatitis B Core

**HBeAg** Hepatitis B E Antigen

**HBsAg** Hepatitis B Surface Antigen

**HBV** Hepatitis B Virus

**HCV** Hepatitis C Virus

**IFA** Immuno Fluorescence Antibody

**IgG** Immunoglobulin G

**IgM** Immunoglobulin M

**IGRA** Interferon Gamma Release Assay

**LRN** Laboratory Response Network

**NAAT** Nucleic Acid Amplification Test

**PCR** Polymerase Chain Reaction

**PFGE** Pulse-Field Gel Electrophoresis

**RIBA** Recombinant ImmunoBlot Assay

**RNA** Ribonucleic Acid

**RPR** Rapid Plasma Reagin

**RT-PCR** Reverse Transcriptase Polymerase Chain Reaction

**TPPA** Treponema Pallidum Particle Agglutination

**TRF** Time Resolved Fluorescence

**VDRL** Venereal Disease Research Laboratory Test



John E. Baldacci, Governor      Brenda M. Harvey, Commissioner

**Maine Center for Disease Control and Prevention**

Infectious Disease Epidemiology  
800-821-5821  
[www.mainepublichealth.gov](http://www.mainepublichealth.gov)

November 2010

**Maine Center for Disease Control and Prevention (Maine CDC)**

[www.mainepublichealth.gov](http://www.mainepublichealth.gov)

**Infectious Disease Epidemiology Program  
Disease Reporting**

[www.maine.gov/dhhs/boh/ddc/epi/disease-reporting](http://www.maine.gov/dhhs/boh/ddc/epi/disease-reporting)

**Health and Environmental Testing Laboratory (HETL)**

[www.mainepublichealth.gov/lab](http://www.mainepublichealth.gov/lab)

**Rules for the Control of Notifiable Conditions**

[www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/notifiable-conditions.doc](http://www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/notifiable-conditions.doc)

**Notifiable Conditions List**

[www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/notifiable-list.doc](http://www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/notifiable-list.doc)

**Notifiable Conditions Reporting Form**

[www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/notifiable-form.doc](http://www.maine.gov/dhhs/boh/ddc/epi/disease-reporting/notifiable-form.doc)