Notes from the Sentinel Liaison
Thank you for participating!

Survey

ListServ

Trainings
  Sentinel Training
    August 9-10, 2017
  Packaging and Shipping
    September 14, 2017

You can be a Sentinel too!!!
Contact Information
Evelyn.Geeter@adph.state.al.us
334-213-2828
Perry Snider
Quality Management
Biosafety Officer
Established Protocols for Infection Control

• Prevention and Control
  – Are risk assessments performed?
  – Are results from the assessments communicated to staff?
  – Is there a protocol for exposures?
    • Prophylaxis
    • Fever Watch

• Surveillance/Monitoring
  – Are changes made to the standard operating procedure after an incident?
  – Are the changes communicated and documented to staff?
Contact Information

- Telephone: (334) 260-3426
- Email: perry.snider@adph.state.al.us
DANITA ROLLIN, BS, MT (ASCP)

NEWBORN SCREENING DIVISION MANAGER
BUREAU OF CLINICAL LABORATORIES
Specimen Collection - Fill circles completely using one drop of blood. Do not overlay sample. Do not allow blood to clot. Allow blood to dry.

Form Completion –

- Fill out the NBS form completely, accurately, and legibly in blue or black ink.
- Birth weight: Include units if not provided in grams.
- Provide ordering and referral physician.
- Keep a Log – Document kit #’s, review specimen integrity & information.

Results –

- Test results should be reviewed, shared with physician, and follow up provided if necessary.
- Register with Secure Remote Viewer (SRV) to have quick access to results.

NEW FORMS ARE HERE

Update YOUR information with the LAB
NEWBORN SCREENING LABORATORY
P: 334-260-3476
F: 334-260-3439

DANITA ROLLIN
NBS DIVISION MANAGER
P: 334-260-3475

DEANNE MORRIS
NBS SUPERVISOR
P: 334-260-3443

DEREK KENNEDY
NBS SUPERVISOR
P: 334-260-3489

LYNN GREEN
NBS SUPERVISOR
P: 334-213-2823
Microbiology Division
Bureau of Clinical Laboratories

Acting Manager
Aretha Williams, Ph.D.
Friendly Reminders

- Please complete the form:
  - Date of Birth, Collection Date, Source of Specimen, Patient Identifier, Test Ordered
- Do not send dark copies of the form. Print a new one periodically.
- Freeze ice packs; not refrigerate
- Check the “Analytes Offered by ADPH” for the correct sample type and transport media.
  - http://www.adph.org/bcl/
- *Streptococcus pneumoniae* - specimen needs to be from a sterile site; the patient needs to be under 12 & have been vaccinated
- Please send Darryl your CRE
Microbiology Sections

• Conventional Microbiology (The Best Section)
  – Darryl Pendergrass, Supervisor
  – 334-260-3481

• Emerging Infectious Diseases (EID)
  – Evelyn Geeter, Supervisor
  – 334-260-3429

• Respiratory Diseases (TB & Mycology)
  – Stacey Hall, Supervisor
  – 334-260-3473
Reporting to Public Health

What Laboratorians Need to Know

May 2017
Infectious Diseases & Outbreaks Division
Reportable Diseases/Conditions

- Purpose of Reportable Diseases
  - Understand burden of specified diseases
  - Prevent additional disease
  - Educate providers, patient, and community


- ADPH administrative code authorizes and requires reporting [http://codes.lp.findlaw.com/alcode/22/1/11A/1/22-11A-6#sthash.0ZJcSROh.dpuf](http://codes.lp.findlaw.com/alcode/22/1/11A/1/22-11A-6#sthash.0ZJcSROh.dpuf)

- ADPH is exempt from HIPAA Privacy Rules, [http://www.cdc.gov/mmwr/pdf/other/m2e411.pdf](http://www.cdc.gov/mmwr/pdf/other/m2e411.pdf)
Don’t Wait!

Remember to report presumptive positives for Immediate, Extremely Urgent Diseases

- Anthrax, human
- Botulism
- Plague
- Poliomyelitis, paralytic
- Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV)
- Smallpox
- Tularemia
- Viral hemorrhagic fever
- Cases related to nuclear, biological, or chemical terroristic agents
Labs **Must** Report Electronically

- Set up Electronic Laboratory Reporting (ELR)
  - Create interface to submit **automatically** labs into ALNBS via HL7 messaging
- Enter into ALNBS on-site tests performed
  - Set up accounts for all employees who may enter lab results into ALNBS
  - Contact ID&O at 800-338-8374

http://www.adph.org/epi/assets/Defining_Electronic_Submissions_from_Laboratories.pdf
Electronic Lab Reports (ELR)

- Ensure notifications to Public Health
- Expedite notifications to Public Health
- Reduce time spent babysitting the fax machine
- Eliminate time spent trying to read the faxed lab reports
- Provide standard messages to report tests performed along with their result(s)
Minimum Data Elements

- Name disease or health condition
- Patient’s
  - Name
  - DOB
  - Gender
  - Race
  - Ethnicity
  - Address
  - Phone

- Date of lab results, date of onset, and/or date of diagnosis
- Reporter’s
  - Name
  - Phone
  - Facility

Additional information from Laboratories:
- Test Method(s)
- Reference ranges
Electronic Lab Reporting is Not

- Laboratory faxing lab reports
- Infection Preventionist (IP) submitting a REPORT Card
- IP faxing lab reports and demographics to Area Investigators or Central Office
- Using the Web Portal to send specimens to the State Lab
Clinical Specimens of PH Interest

- Bacillus anthracis
- Botulinum neurotoxin-producing species of Clostridium
- Brucella abortus
- Brucella melitensis
- Brucella suis
- Burkholderia mallei
- Burkholderia pseudomallei
- Campylobacter spp.
- Coxiella burnetii
- Cryptosporidium spp.
- E. coli, shiga-toxin producing
- Ebola
- Francisella tularensis
- Haemophilus influenzae*
- Listeria monocytogenes*
- Neisseria meningitidis*
- Novel Influenza
- Salmonella serotype Typhi
- Salmonella spp., nontyphoidal
- SARS-associated coronavirus (SARS-CoV), and novel coronaviruses
- Shigella spp.
- Streptococcus pneumoniae* in children <5 yrs old
- Variola (Smallpox virus)
- Vibrio spp.
- Yersinia pestis
Guide for Influenza Surveillance

Submit specimens from:

- All hospitalized patients with influenza-like illness (ILI*)
- All pregnant females with ILI*
- All patients with recent international travel and ILI*
- Additionally, 2 influenza specimens year round
  - Do not collect more than one specimen per family, household, or close contact.
  - Do not prescreen by sending only rapid negative or rapid positives, send for anyone with ILI*

*ILI symptoms include 100.4° fever along with cough or sore throat with no other known cause
Web Portal ≠ Disease Reporting
New Website Address Coming Soon . . .

AlabamaPublicHealth.gov/InfectiousDiseases