



Arkansas Department of Health

4815 West Markham Street • Little Rock, Arkansas 72205-3867 • Telephone (501) 661-2000

Governor Asa Hutchinson

Renee Mallory, RN, BSN, Interim Secretary of Health

Jennifer Dillaha, MD, Director

Rules Pertaining to Reportable Diseases

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BACKGROUND

The Rules Pertaining to Reportable Diseases provide for the prevention and control of communicable diseases and to protect the public health, welfare and safety of the citizens of Arkansas.

KEY POINTS

These changes are intended to harmonize our reporting rules with the nationally notifiable disease list recommended by the Council of State and Territorial Epidemiologists (CSTE) and practices among other state health departments.

DISCUSSION

It is proposed to modify the Rules Pertaining to Reportable Diseases as follows:

Nationally notifiable conditions added:

Leptospirosis (added nationally in 2014, was removed off AR list and needs to be added back)

Conditions newly defined nationally:

Non-pestis Yersiniosis (includes species in addition to enterocolitica)

Cryptococcosis: Cryptococcus is a ubiquitous fungal pathogen that causes meningitis or pneumonia. It has been associated with outbreaks in the Northwest United States and in Arkansas. A consensus case definition was recently developed by CSTE.

Conditions newly proposed to be added at the state level:

Acute Flaccid Myelitis: Uncommon but serious neurologic condition that causes muscle weakness, sometimes leading to permanent paralysis. This is not nationally notifiable, but CDC relies on clinician recognition and health department reporting of suspected AFM cases to learn more about AFM and what causes it.

Alpha-Gal Syndrome: This is an emerging health issue in the Southern United States that presents as a delayed allergic reaction to ingestion of mammalian meats. It appears

to be potentiated by bites of the lone star tick (the most common tick in Arkansas). A consensus case definition was recently developed by CSTE.

Animal Bites: This is necessary to assess the burden of bites as well as monitor and assure appropriate rabies testing of the biting animals and prophylaxis of both the animals and humans. Animal bites are mandated to be reported in most states and in another area of Arkansas Rules. It is proposed to be added here for consistency and searchability.

Monkeypox : This is an emerging infectious disease that is spread mostly through close, intimate contacts with someone who has monkeypox.; it currently is spreading across several countries that don't normally report monkeypox, including the United States.

Multisystem inflammatory syndrome (MIS) is a rare but serious condition associated with COVID-19 in which different body parts become inflamed, including the heart, lungs, kidneys, brain, skin, eyes, or gastrointestinal organs. It can affect children (MIS-C) and adults (MIS-A).

Multisystem Inflammatory Syndrome in Children (MIS-C): Multisystem inflammatory syndrome in children (MIS-C) is a rare but severe condition in children and adolescents infected with SARS-CoV-2, the virus that causes COVID-19. This is not nationally notifiable, but CDC relies on clinician recognition and health department reporting of suspected MIS-C cases to learn more about it.

Multisystem Inflammatory Syndrome in Adults (MIS-A): Like children, adults who have been infected with the virus that causes COVID-19 can develop symptoms of MIS-A days to weeks after getting sick.

Conditions that need modification based on CDC recommendations:

Blood Lead: The health department follows the U.S. Centers for Disease Control and Protection (CDC's) recommended blood lead level (BLL) values to treat children with blood lead levels that are higher than most U.S. children's levels. CDC has updated its [blood lead reference value \(BLRV\)](#) from 5 micrograms per deciliter ($\mu\text{g}/\text{dL}$) to 3.5 $\mu\text{g}/\text{dL}$ in response to the Lead Exposure Prevention and Advisory Committee (LEPAC) recommendation made on May 14, 2021.

The BLRV is based on the 97.5th percentile of the blood lead level (BLL) distribution among children 1-5 years old in the U.S. from the two most recent cycles of data from the [National Health and Nutrition Examination Survey \(NHANES\)](#). Thus, based on NHANES data from 2015-2018, CDC accepted the LEPAC recommendation to update the BLRV to 3.5 $\mu\text{g}/\text{dL}$.

Since CDC encourages local and state officials to help communities use the lowered reference value to determine the BLL required for case management and environmental investigation in Arkansas, we request this update be reflected in the ADH Reportable Disease list.

Conditions that need modification based on changes in testing/reporting:

Carbapenem resistant Enterobacterales (CRE): Proposing that carbapenem resistant Enterobacterales (CRE) is updated to infections caused by carbapenemase producing organisms (CPO). Right now, our rules and regs is only CRE which doesn't encompass all the CPOs that could be encountered. This change would also reflect how CSTE is updating the case definition for CRE and would require facilities to report carbapenem-resistant Enterobacterales (CRE), carbapenemase-resistant *Pseudomonas aeruginosa* (CRPA), and carbapenem-resistant *Acinetobacter baumannii* (CRAB).

This shouldn't negatively impact facilities or reference laboratories. The State Public Health Lab (SPHL) and regional AR Lab Network have the capacity to perform carbapenemase testing for no charge. The reference labs are already forwarding potential CPOs (Enterobacterales, *Pseudomonas*, and *Acinetobacter*) to our SPHL for testing and the same can be said about most hospitals. This change would align to what they are already doing. Also, if a new carbapenemase would be identified, then it would be on our reportable disease without making additional changes.

Candida auris: Proposing that we drop *Candida haemulonii* from the condition list. For *C. auris*, *C. haemulonii* was commonly misidentified for *C. auris*. Since MALDI-TOF databases have been updated and this is not a current issue. Most hospitals are sending isolates to the State Public Health Lab for rule out currently at no charge for testing. As of right now, we are getting few reports of potential *C. auris*/*C. haemulonii* and have not identified *C. auris* in Arkansas.

Carbapenemase producing organisms (CPO) was listed on part A of Section V. Disease and Conditions Section but needs to be listed in this section as infections caused by Carbapenemase producing organisms and then listed as Carbapenemase producing organisms in section V part D.

Coronavirus Disease 2019 (COVID-19 caused by SARS-CoV-2): Proposing we specify this disease separately as reportable; previously listed on reportable disease list as novel Coronavirus.

Coccidioides immitis was listed on part A of Section V. Disease and Conditions Section but needs to be listed as the disease in this section as Coccidioidomycosis (caused by *Coccidioides*).

Cryptococcus was listed on part A of Section V. Disease and Conditions Section but needs to be listed as the disease in this section as Cryptococcosis.

Glanders was currently listed on Section V. Disease and Conditions, part D, which instructs submitting isolates of the agent but needs to be listed on part A. Notifiable Disease and Condition.

Melioidosis was listed on both part A and D of Section V. Disease and Conditions. Removed from part D which instructs regarding isolate submission.

Other changes:

Change in reporting instructions to include preferred electronic reporting using a HL7 feed or reporting portal, phone call with updated numbers, and a fax with updated reporting form.