

# Summary of Public Health Reporting for 2023

## Reporting Procedures and Resources

All public health reporting documentation and guidance for reportable communicable and environmental diseases in Tennessee is available on the Reportable Diseases website at <https://www.tn.gov/health/cedep/reportable-diseases.html>.

### Reporting Methods and Requirements

Healthcare Facilities/Providers and Laboratories should report using one of the following methods:

#### 1. Report Via Fax

The PH-1600 may be faxed or emailed directly to the local or regional health office at <https://www.tn.gov/health/health-program-areas/localdepartments.html>, or to the Communicable and Environmental Diseases and Emergency Preparedness (CEDEP) Division at the Tennessee Department of Health (TDH) at (615) 741-3857.

#### 2. Report Online

Online reporting for all conditions is completed in the National Electronic Disease Surveillance System (NEDSS) Base System (NBS): <https://hssi.tn.gov/auth/login>. Healthcare providers and laboratories will log in to NBS to enter patient demographics, the reportable condition, facility, and provider information, and attach lab report information. Reporters can request an account at <https://redcap.health.tn.gov/redcap/surveys?s=8L7CMWHN4M>. If you encounter problems signing up, please email [ceds.informatics@tn.gov](mailto:ceds.informatics@tn.gov).

Laboratories have the additional reporting option:

#### 3. Electronic Laboratory Reporting (ELR)

Requirements for electronic laboratory reporting are available at <https://www.tn.gov/health/cedep/laboratory-reporting.html>.

### Hospitals

Reporting antibiotic use in acute care hospitals through the National Healthcare Safety Network's Antibiotic Use and Resistance Module will be required beginning January 1, 2023. This was a phased-in approach based on hospital bed size and will begin with facilities with  $\geq 250$  beds (which went live this year). The current edit is to add acute care hospitals  $> 100$  beds, but no change to the core reportable event is planned. To see the roll out plan for future years, please visit <https://www.tn.gov/health/cedep/hai.html>.

## 2023 Reportable Disease Documentation in Tennessee (For Healthcare Providers and Laboratories)

Important changes in 2023 include:

### Healthcare Providers/Facilities Only:

- Disease name on the Provider List text changed from: Drug Overdose (Opioids, Benzodiazepines, Stimulants, Muscle Relaxants) to Drug Overdose to improve overdose surveillance by giving a more accurate snapshot of nonfatal overdoses involving illicit substances and polysubstance use.
- Botulism (Infant or Botulinum Toxin) is now immediately notifiable.

## Laboratories Only:

- Lead Levels - Elevated blood lead levels ( $\geq 3.5$   $\mu\text{g/dL}$ ) should be reported within 1 week and those  $< 3.5$   $\mu\text{g/dL}$  should be reported within 1 month

Below diseases have updated lab submission guidance:

- Group A Streptococcal *pyogenes* Invasive Disease
- Group B Streptococcal Invasive Disease
  - *Streptococcus agalactiae* Invasive Disease
  - *Streptococcus pneumoniae* Invasive Disease
- *Haemophilus influenzae* Invasive Disease
- Meningococcal Disease (*Neisseria meningitidis*)

## 2023 Reportable Diseases in Tennessee: Detailed Laboratory Guidance

For 2023, the Detailed Laboratory Guidance document has been updated with the following changes:

- Mpox (Monkeypox) was added to the Reportable Diseases List. Mpox will remain in 2023 for ongoing surveillance and response.
- Antibiotic resistant pathogens:
  - Carbapenemase-producing *Pseudomonas aeruginosa*. (CP-CRPA)
  - Carbapenemase-producing *Acinetobacter baumannii*. (CP-CRAB)
- Emerging Infections Program surveillance:
  - *Candida* species isolated from blood are newly reportable in the east Tennessee EIP catchment area
- Routine changes based on CSTE case definition changes:
  - Coronavirus disease caused by SARS CoV-2
  - Gonorrhea
  - Lyme Disease
  - Rabies (Animal) Review
- Additional details have been added to the Laboratory Tests and Results to Report to Public Health
- Updated or clarified language for lab guidance for the following conditions:
  - *Candida auris*, Carbapenem-resistant *Enterobacteriales*, *Escherichia coli*: Shiga-Toxin Producing, Extended Spectrum Beta Lactamase-Producing *Escherichia coli*, Group A Streptococcal Invasive Disease, Group A Streptococcal Invasive Disease, Group B Streptococcal Invasive, *Haemophilus influenzae* Invasive Disease, *Klebsiella*, Lead Levels, Listeriosis, Meningococcal Disease (*Neisseria meningitidis*), and Yersiniosis
  - Additional pathogens/organisms for the following conditions:
    - Lyme Disease, Viral Hemorrhagic Fevers
  - Change/ Update to names for the following conditions:
    - Drug Overdose, Group A Streptococcal Invasive Disease, HAI, NHSN: Antibiotic Use, HAI, NHSN: *Clostridium difficile*, *Mycobacteria* Non-Tuberculosis (Extra-Pulmonary), *Staphylococcus aureus*: Enterotoxin B Pulmonary Poisoning, Vancomycin-Resistant *Enterococcus* Invasive Disease