

# Working with Arizona Department of Health Services:

## A Pima County Perspective

2012 Arizona Infectious Disease  
Conference

# Investigation of Reportable Diseases

## Arizona Administrative Code\* Requires Providers To: Report Communicable Diseases to the Local Health Department

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> * <input type="radio"/> Amebiasis                | <input type="checkbox"/> Hantavirus infection                             | <input type="checkbox"/> * <input type="radio"/> Salmonellosis   |
| <input type="checkbox"/> Anthrax  | <input type="checkbox"/> Hemolytic uremic syndrome                        | <input type="radio"/> Scabies  |
| <input type="checkbox"/> Aseptic meningitis: viral                        | <input type="checkbox"/> * <input type="radio"/> Hepatitis A              | <input type="checkbox"/> Severe acute respiratory syndrome   |
| <input type="checkbox"/> Basidiobolomycosis                               | <input type="checkbox"/> Hepatitis B and D                                | <input type="checkbox"/> * <input type="radio"/> Shigellosis   |
| <input type="checkbox"/> Botulism   | <input type="checkbox"/> Hepatitis C                                      | <input type="checkbox"/> Smallpox  |
| <input type="checkbox"/> Brucellosis                                      | <input type="checkbox"/> * <input type="radio"/> Hepatitis E              | <input type="checkbox"/> Streptococcal Group A: invasive disease   |
| <input type="checkbox"/> * <input type="radio"/> Campylobacteriosis       | <input type="checkbox"/> Herpes genitalis                                 | <input type="checkbox"/> Streptococcal Group B: invasive disease in infants younger than 90 days of age                      |
| <input type="checkbox"/> Chagas disease (American trypanosomiasis)        | <input type="checkbox"/> HIV infection and related disease                | <input type="checkbox"/> <i>Streptococcus pneumoniae</i> (pneumococcal invasive disease)                                     |
| <input type="checkbox"/> Chancroid  | <input type="checkbox"/> Influenza-associated mortality in a child        | <input type="checkbox"/> Syphilis  |
| <input type="checkbox"/> Chlamydia infection, sexually transmitted        | <input type="checkbox"/> Kawasaki syndrome                                | <input type="checkbox"/> * <input type="radio"/> Taeniasis   |
| <input type="checkbox"/> * <input type="radio"/> Cholera                  | <input type="checkbox"/> Legionellosis (Legionnaires' disease)            | <input type="checkbox"/> Tetanus   |
| <input type="checkbox"/> Coccidioidomycosis (valley fever)                | <input type="checkbox"/> Leptospirosis                                    | <input type="checkbox"/> Toxic shock syndrome  |
| <input type="checkbox"/> Colorado tick fever                              | <input type="checkbox"/> Listeriosis                                      | <input type="checkbox"/> Trichinosis   |
| <input type="radio"/> Conjunctivitis: acute                               | <input type="checkbox"/> Lyme disease                                     | <input type="checkbox"/> Tuberculosis, active disease  |
| <input type="checkbox"/> Creutzfeldt-Jakob disease                        | <input type="checkbox"/> Lymphocytic choriomeningitis                     | <input type="checkbox"/> Tuberculosis latent infection in a child 5 years of age or younger (positive screening test result) |
| <input type="checkbox"/> * <input type="radio"/> Cryptosporidiosis        | <input type="checkbox"/> Malaria  | <input type="checkbox"/> Tularemia   |
| <input type="checkbox"/> <i>Cyclospora</i> infection                      | <input type="checkbox"/> Measles (rubeola)                                | <input type="checkbox"/> Typhoid fever   |
| <input type="checkbox"/> Cysticercosis                                    | <input type="checkbox"/> Meningococcal invasive disease                   | <input type="checkbox"/> Typhus fever  |
| <input type="checkbox"/> Dengue   | <input type="checkbox"/> Mumps  | <input type="checkbox"/> Unexplained death with a history of fever   |
| <input type="radio"/> Diarrhea, nausea, or vomiting                       | <input type="checkbox"/> Pertussis (whooping cough)                       | <input type="checkbox"/> Vaccinia-related adverse event  |
| <input type="checkbox"/> Diphtheria                                       | <input type="checkbox"/> Plague   | <input type="checkbox"/> Vancomycin-resistant or Vancomycin-intermediate <i>Staphylococcus aureus</i>                        |
| <input type="checkbox"/> Ehlichiosis and Anaplasmosis                     | <input type="checkbox"/> Poliomyelitis                                    | <input type="checkbox"/> Vancomycin-resistant <i>Staphylococcus epidermidis</i>  |
| <input type="checkbox"/> Emerging or exotic disease                       | <input type="checkbox"/> Psittacosis (ornithosis)                         | <input type="checkbox"/> Varicella (chickenpox)  |
| <input type="checkbox"/> Encephalitis, viral or parasitic                 | <input type="checkbox"/> Q fever  | <input type="checkbox"/> * <input type="radio"/> <i>Vibrio</i> infection   |
| <input type="checkbox"/> Enterohemorrhagic <i>Escherichia coli</i>        | <input type="checkbox"/> Rabies in a human                                | <input type="checkbox"/> Viral hemorrhagic fever   |
| <input type="checkbox"/> Enterotoxigenic <i>Escherichia coli</i>          | <input type="checkbox"/> Relapsing fever (borreliosis)                    | <input type="checkbox"/> West Nile virus infection   |
| <input type="checkbox"/> * <input type="radio"/> Giardiasis               | <input type="checkbox"/> Reye syndrome                                    | <input type="checkbox"/> Yellow fever  |
| <input type="checkbox"/> Gonorrhea  | <input type="checkbox"/> Rocky Mountain spotted fever                     | <input type="checkbox"/> * <input type="radio"/> Yersiniosis   |
| <input type="checkbox"/> <i>Haemophilus influenzae</i> : invasive disease | <input type="checkbox"/> * <input type="radio"/> Rubella (German measles) |  |
| <input type="checkbox"/> Hansen's disease (Leprosy)                       | <input type="checkbox"/> Rubella syndrome, congenital                     |  |

Submit a report by telephone or through an electronic reporting system authorized by the Department within 24 hours after a case or suspect case is diagnosed, treated, or detected or an occurrence is detected.

\* If a case or suspect case is a food handler or works in a child care establishment or a health care institution, instead of reporting within the general reporting deadline, submit a report within 24 hours after the case or suspect case is diagnosed, treated, or detected.

Submit a report within one working day after a case or suspect case is diagnosed, treated, or detected.

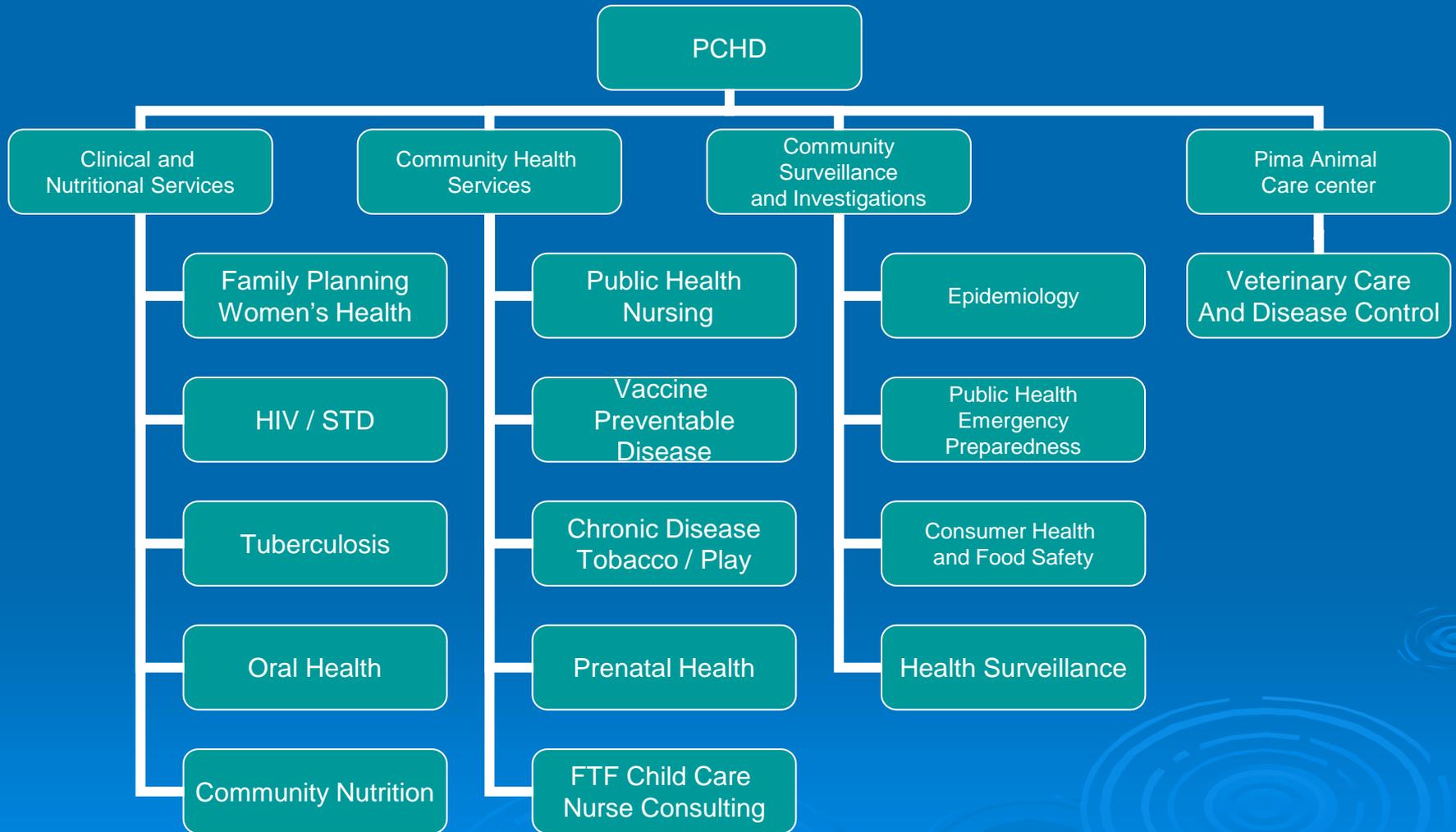
Submit a report within five working days after a case or suspect case is diagnosed, treated, or detected.

Submit a report within 24 hours after detecting an outbreak.

[www.azdhs.gov/phs/oids/hcp\\_rpt.htm](http://www.azdhs.gov/phs/oids/hcp_rpt.htm)

\*A.A.C. R9-6-202  
Effective 04/01/2008

# Pima County Health Department



# Jurisdictions

**Centers for Disease Control and Prevention**



**Arizona Department of Health Services**



**Pima County Health Department**

**Morbidity: ex salmonella**

Compare results across nation



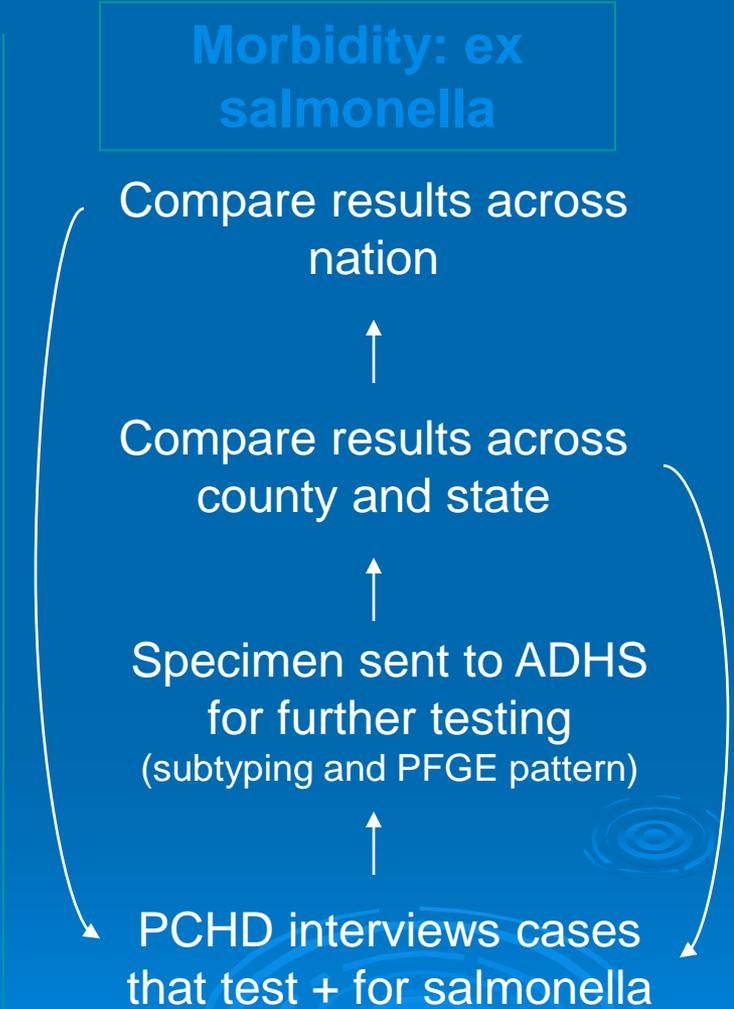
Compare results across county and state



Specimen sent to ADHS for further testing (subtyping and PFGE pattern)



PCHD interviews cases that test + for salmonella





# MEDSIS Features

**Patient Search**

Patient Search

**Patient**

Patient

**Case entry**

Case entry

**Case Details**

Case Details

**Observations**

Observations

**Provider**

Provider

**Reporter**

Reporter

**Case Notes**

Case Notes

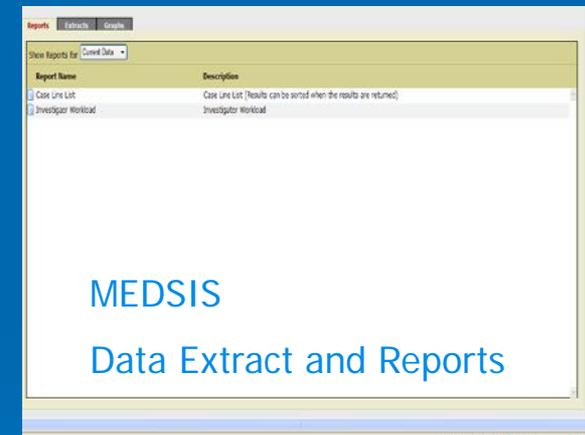
**DSO**

DSO

# Reporting from ADHS to the CDC

- The data must be extracted and cleaned, compiled to be reported to the Centers for Disease Control and Prevention (CDC) for the CDC's National Electronic Telecommunications System for Surveillance (NETSS)

IDPHCASE	MEDSISID	IDCOUNT1	DTONSET	DTCOMPLT	RECCCLACD	RECCLAS	MORBIDCD	MORBID	DETECTCD	DTDIAGNO	IMPORTCD	ISTATUCD
1982202	11-1982202				Not Assigned	CMP	Campylobacteriosis		N	Not Assigned	32	2011
1978107	11-1978107	08/02/2011			C confirmed	CMP	Campylobacteriosis	PR	08/08/2011	A	active	32
1981888	11-1981888				Not Assigned	COC	Coccidioidomycosis		08/09/2011	N	Not Assigned	32
1982398	11-1982398				Not Assigned	COC	Coccidioidomycosis		08/11/2011	N	Not Assigned	32
1981239	11-1981239				Not Assigned	ECH	E. coli enterohemorrhagic (shiga toxin)			N	Not Assigned	32
1982225	11-1982225	08/14/2011			C confirmed	GIA	Giardiasis	PR	08/15/2011	A	active	33
1978159	11-1978159				Not Assigned	HBV	Hepatitis B	LR	08/09/2011	A	Not Assigned	32
1982764	11-1982764				Not Assigned	HBV	Hepatitis B		07/25/2011	N	Not Assigned	32
1982874	11-1982874			C	confirmed	HBV	Hepatitis B	LR	07/29/2011	N	new	32
1982078	11-1982078				Not Assigned	LYM	Lyme disease		08/11/2011	N	Not Assigned	32
1982096	11-1982096				Not Assigned	LYM	Lyme disease		08/11/2011	N	Not Assigned	32
1982093	11-1982093				Not Assigned	PTS	Pertussis		08/10/2011	N	Not Assigned	32
1977644	11-1977644				Not Assigned	QFV	Q Fever		08/03/2011	A	Not Assigned	32
1982137	11-1982137			C	confirmed	SHG	Shigellosis	LR	08/15/2011	A	active	33
1982171	11-1982171			C	confirmed	SHG	Shigellosis	LR		A	active	33
1975781	11-1975781			C	confirmed	SLM	Salmonellosis	LR	08/08/2011	N	new	32
1977140	11-1977140			C	confirmed	SLM	Salmonellosis	LR		A	active	32
1977161	11-1977161			C	confirmed	SLM	Salmonellosis	LR		A	active	32
1980605	11-1980605			C	confirmed	SLM	Salmonellosis	LR		A	active	32
1981228	11-1981228				Not Assigned	SLM	Salmonellosis			N	Not Assigned	32
1981235	11-1981235				Not Assigned	SLM	Salmonellosis			N	Not Assigned	32
1982167	11-1982167				Not Assigned	SLM	Salmonellosis	LR	08/15/2011	N	Not Assigned	33
1982206	11-1982206			C	confirmed	SLM	Salmonellosis		08/08/2011	A	active	32
1981330	11-1981330	08/06/2011			Not Assigned	SLM	Salmonellosis	PR	08/06/2011	A	Not Assigned	32
1977164	11-1977164	08/07/2011		C	confirmed	SLM	Salmonellosis	PR	08/10/2011	A	active	32
1982212	11-1982212	08/10/2011			Not Assigned	SLM	Salmonellosis	PR	08/14/2011	N	Not Assigned	33
1982218	11-1982218	08/10/2011			Not Assigned	SLM	Salmonellosis	PR	08/15/2011	N	Not Assigned	33
1977767	11-1977767				Not Assigned	WNV	West Nile virus		08/09/2011	N	Not Assigned	32
1978900	11-1978900				Not Assigned	WNV	West Nile virus			N	Not Assigned	32

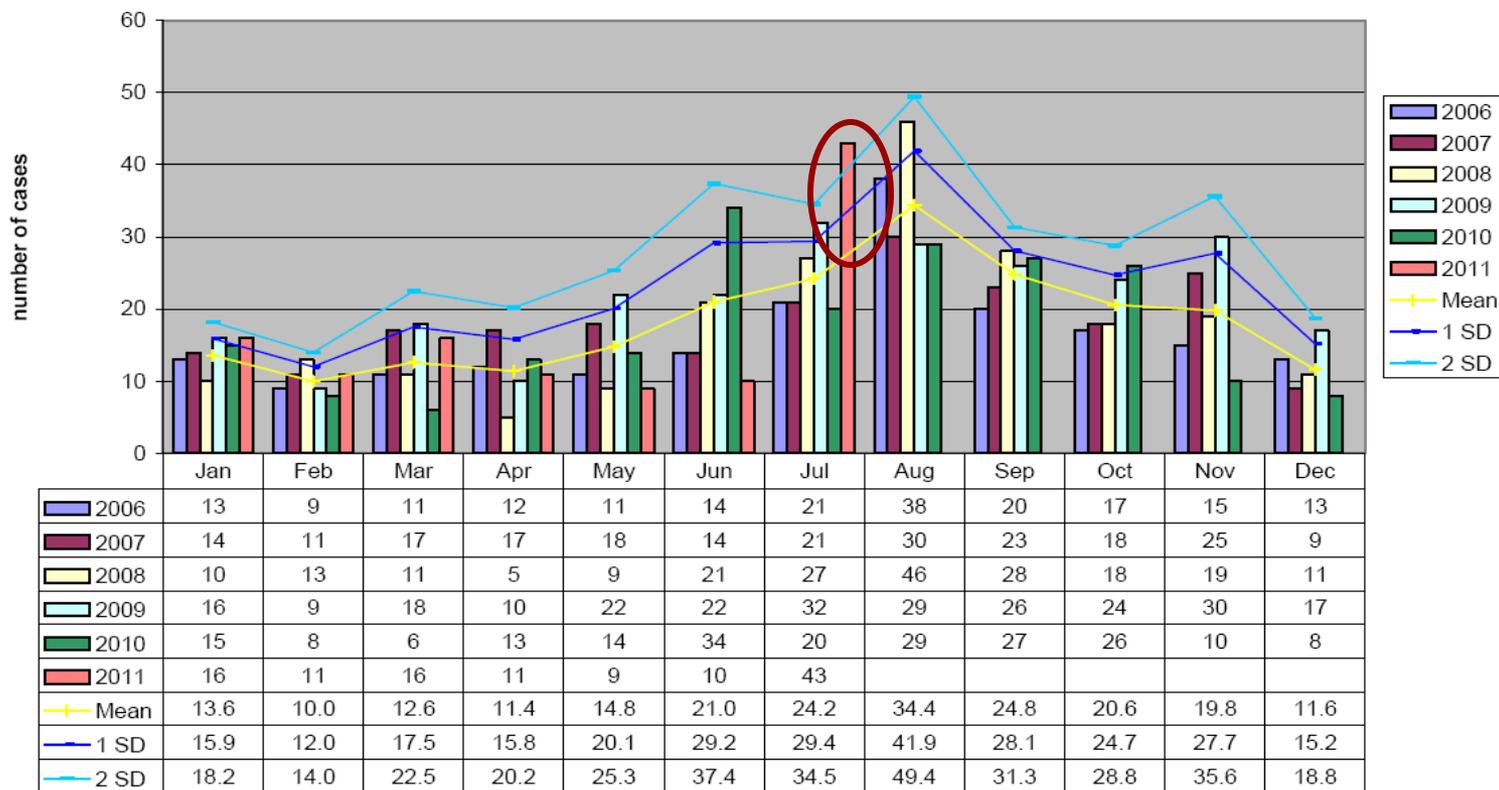


MEDSIS

Data Extract and Reports

# Monthly Disease Surveillance Aberration Reports

Pima County Health Department  
Confirmed and Probable Salmonellosis Cases, 2006-2011



Mean and SD based on 2006-2010 cases, data is from 8/15/2011 MEDSIS extract

# Epidemiology Data Management

The case information in MEDSIS can be used for baseline data for surveillance, trainings, and for future reports to the CDC. They are kept in files in the ADHS Portal.

The screenshot shows the ADHS Portal interface. At the top, there is a banner for the Arizona Department of Health Services with the slogan "Leadership for a Healthy Arizona". Below the banner is a navigation menu with items like "ADHSPortal", "Health Alert Network (HAN)", "Volunteers", "Contacts", "Preparedness", "EPI & Disease Control", and "Response Center". The main content area is titled "Infectious Disease Documents" and features a breadcrumb trail: "ADHSPortal > EPI & Disease Control > Infectious Disease > Infectious Disease Documents". A left sidebar contains "View All Site Content", "Documents" (with a sub-link for "Infectious Disease Documents"), and a "Recycle Bin". The main area has a table with columns for "Type", "Name", and "Checked Out To". The table lists several folders: "AZ Foodborne Taskforce", "Disaster Epidemiology", "Epi Exercise Documents", "EpiAZ", "Influenza", "Outbreak Resources", "Presentations - Trainings - Meetings", "School Surveillance", "Unexplained Deaths", and "Vector-Borne-Zoonotic Disease".

ADHSPortal

Arizona Department of Health Services  
Leadership for a Healthy Arizona  
Arizona Department of Health Services

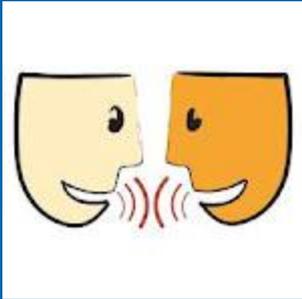
ADHSPortal | Health Alert Network (HAN) | Volunteers | Contacts | Preparedness | EPI & Disease Control | Response Center

ADHSPortal > EPI & Disease Control > Infectious Disease > Infectious Disease Documents

## Infectious Disease Documents

New | Upload | Actions

Type	Name	Checked Out To
Folder	AZ Foodborne Taskforce	
Folder	Disaster Epidemiology	
Folder	Epi Exercise Documents	
Folder	EpiAZ	
Folder	Influenza	
Folder	Outbreak Resources	
Folder	Presentations - Trainings - Meetings	
Folder	School Surveillance	
Folder	Unexplained Deaths	
Folder	Vector-Borne-Zoonotic Disease	



# Communication



[Submit Email to CMO](#)  
[Print Form](#)

**Case\*/Outbreak Investigation Update**  
\* 24-hour reportables that need CMO recommendations

Case's Initials:                      Primary Investigator: \*Select Investigator\*

Case's Age/DOB:                      Secondary Investigator: \*No Secondary Investigator\*

Medsis ID:                              Morbidity: \*Select Morbidity\*

Is this an outbreak?              Yes               No

**If an outbreak, please fill out the following information:**  
(Please fill out as more information becomes available)

Outbreak name:	Type of facility:
Total # symptomatic:	Total # in facility:
Range/length of time of symptoms:	
Case definition:	

Date	Time
Situational Update 1	
Action Plan	
CMO/ Manager Comments	

# Projected Outcomes



- Improved data capturing
- Results in improved surveillance
- Efficient management of cases
- Cost reduction for the state, counties and local health departments.
- Communication on clinical guidance and infection control measures to health partners

The image is a screenshot of the Arizona Department of Health Services (ADHS) website. The page is titled 'Escherichia coli O157:H7 in Arizona' and is categorized under 'Home'. The main content area provides information about the bacterium, including its prevalence in Arizona, recent outbreaks, and what it is. A sidebar on the left contains a navigation menu with links to various services and resources. The page also features a search bar at the top right and a 'Health Guidance' logo on the right side. The overall layout is clean and organized, with a focus on providing clear information to the public.

# My Thoughts

- Documentation may seem timely, but is extremely helpful in writing reports or for future investigations.
- ADHS and other jurisdictions can be a great resource!
- Questions??

# References:

Bradford, G., & Woodson, L. A Day In the Life of an Epidemiologist. The Stuff They Don't Teach You in School. Power Point Presentation. 2011.

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