

NOTIFIABLE INFECTIOUS DISEASES

KEY POINTS

Doctors have a statutory responsibility to notify if they suspect one of their patients has an infectious disease on the list below

A form has to be filled in and sent to your Consultant in Communicable Disease Control (CCDC); information includes date of onset, patient address, name, sex, age

A simple way of doing this is through the Infection Control Team

THE LAW

Section 11(1) of the Public Health (Control of Disease) Act 1984

“If a registered medical practitioner becomes aware, or suspects, that a patient whom he is attending within the district of a local authority is suffering from a notifiable disease or from food poisoning, he shall, unless he believes, and has reasonable grounds for believing, that some other registered medical practitioner has complied with the subsection with respect to the patient, forthwith send to the proper officer of the local authority for the district a certificate stating:

- the name, age and sex of the patient and the address where the patient is,
- the disease, or as the case may be, particulars of the poisoning from which the patient is, or is suspected to be, suffering and the date, or approximate date, of its onset, and
- If the premises are a hospital, the day on which the patient was admitted, the address of the premises from which he came there and whether or not, in the opinion of the person giving the certificate, the disease or poisoning from which the patient is, or suspected to be, suffering was contracted in the hospital.”

GUIDELINES

General Medical Council. Duties of a doctor. Serious Communicable Diseases. 1999

“You must disclose information about serious communicable diseases in accordance with the law. For example, the appropriate authority must be informed where a notifiable disease is diagnosed....”







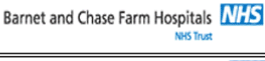
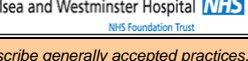
IN HOUSE INTERPRETATION

At the very least, a consultant in charge of a case has a duty to notify ward staff if a patient with an infection which is a risk to staff (such as HIV and HBV) is admitted or to be admitted.

DISEASES INCLUDED ON THE LIST

The diseases listed below require Notification to the proper authorities. The aim of Notification is to identify infection risks and institute appropriate control measures.

IF YOU ADMIT A PATIENT KNOWN TO HAVE ANY OF THESE DISEASES, PLEASE INFORM THE INFECTION CONTROL TEAM AT THE EARLIEST OPPORTUNITY.

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If a patient is admitted to hospital with a diagnosis of, or suspected of having, any of the diseases listed below, the clinician in charge has a legal responsibility to notify the disease to the Consultant in Communicable Disease Control (Proper Officer). This duty is normally carried out by the junior medical staff but is the responsibility of the doctor in charge of the patient.

Notification can be done by sending one of the forms overleaf to the Microbiology Department or by informing them of the patient details by telephone. The Infection Control Team takes the responsibility for formal Notification to the Health District where the patient lives. In an emergency, a microbiologist or infection control nurse will telephone the Proper Officer (usually a Consultant in Communicable Disease Control or an Environmental Health Officer) on duty for that district. This single path of referral will ensure that the appropriate action is taken as quickly as possible.

Official Notification Books are also kept in some hospitals and on certain wards where many patients suffering from infectious diseases are admitted, eg. paediatric wards and Patrick Manson Infectious Disease Unit. Notification of diseases on these wards can therefore be made directly, but the appropriate department of Microbiology and Chest Health Visitor (for tuberculosis only) must be informed by telephone so that records are complete.

STATUTORY NOTIFIABLE DISEASES, 1988


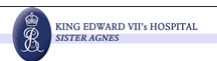





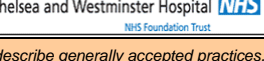
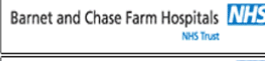

Anthrax	Plague
Cholera	Poliomyelitis (acute)
Diphtheria	Rabies
Dysentery	Relapsing fever
Encephalitis (acute)	Rubella
Food poisoning	Scarlet fever
Leprosy	Smallpox
Leptospirosis	Tetanus
Malaria	Tuberculosis
Measles	Typhoid
Meningitis (acute)	Typhus fever
Meningococcal septicaemia	Viral Haemorrhagic fever

NOTE: In addition, all potentially infectious diseases within the District should be reported to the Infection Control Team. Some diseases such as legionellosis are reported to the Consultant in Communicable Diseases Control even though they are not formally "Notifiable".

*There is some controversy about whether to Notify hepatitis C or hepatitis B virus infection when it is first discovered in a patient with chronic infection because the law relates to "viral hepatitis". In hepatitis C, the acute infection is usually asymptomatic. It is the opinion of the Infection Control Teams that these diseases should be Notified when they are discovered so that appropriate contact tracing can be performed.

REFERENCES

PHLS (HPA). The notification of infectious diseases in England and Wales. Communicable Disease Report CDR Review. Vol 3 Review Number 2. 29 January 1993. ISSN 0144-3186. Available at www.hpa.org.uk/cdr/archives/CDRreview/1993/cdr0293.pdf

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