

LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

NC REPORTABLE DISEASE/CONDITION	INFECTIOUS AGENT (S)
LEPROSY (Hansen's disease)	<i>Mycobacterium leprae</i>
PREPARING FOR INVESTIGATION	
KNOW THE DISEASE/CONDITION	<ul style="list-style-type: none"> • Read about Leprosy in the CD Manual. • See the case definition for Leprosy in the CD Manual. • Study APHA <i>Control of Communicable Diseases Manual, 19th ed., pp 347 - 351.</i> • Study the <u>Red Book, 2009 Report of the Committee on Infectious Diseases, 28th ed., pp 423 - 426, if applicable.</u> • • Print and review reporting forms: <i>Part 1: Confidential Disease Report (DHHS 2124)</i> <i>Part 2: Leprosy (DHHS/EPI #19)</i>
CONDUCTING INVESTIGATION	
COLLECT CLINICAL INFORMATION	<ul style="list-style-type: none"> • If patient hospitalized for this disease, obtain medical record (admission note, progress note, lab report(s), and discharge summary). • Obtain healthcare provider clinical notes from date(s) of service for this disease/condition. • Look for evidence in the medical record that supports clinical findings described in the case definition.
REVIEW LABORATORY INFORMATION	<ul style="list-style-type: none"> • Review laboratory report(s) specific to this disease. • Evaluate laboratory results to determine if requirements of the case definition are satisfied. • Contact healthcare provider if further testing of the patient is indicated.
APPLY THE CASE DEFINITION	<ul style="list-style-type: none"> • Use the case definition to determine if the clinical and laboratory findings meet the case definition criteria.
IMPLEMENTING CONTROL MEASURES	
ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE	<ul style="list-style-type: none"> • Review clinical records for potential source(s) of exposure. • If potential source of exposure is not evident in clinical information, interview patient to obtain additional information.

<p>IMPLEMENT CONTROL MEASURES TO PREVENT DISEASE AND ADDITIONAL EXPOSURES</p>	<ul style="list-style-type: none"> • Refer to the APHA <i>Control of Communicable Diseases Manual</i>, 19th ed., pp 350 - 351. • Refer to <u>Red Book, 2009 Report of the Committee on Infectious Diseases</u>. 28th ed., pp 423 – 426, if applicable. • Use the CDC website www.cdc.gov to teach at risk people about the disease.
<p>REPORTING INVESTIGATION</p>	
<p>REPORT TO NC COMMUNICABLE DISEASE BRANCH (CD)</p>	<ul style="list-style-type: none"> • Enter Part 1 and Part 2 Communicable Disease Reports into NC EDSS as a new event, or update the existing event if already entered. • Assign event to State Disease Registrar when case investigation complete.
<p>CASE FINDING</p>	<ul style="list-style-type: none"> • During the course of the investigation, maintain active surveillance for symptoms of the disease in other exposed individuals (household contacts). • Refer symptomatic individuals to healthcare provider for evaluation. • Household contacts should be examined initially and then annually for 5 years.
<p>SPECIAL CONSIDERATIONS</p>	
<p>STATE LABORATORY OF PUBLIC HEALTH (SLPH) TESTING</p>	<ul style="list-style-type: none"> • Verify the laboratory test results of all cases by sending specimen(s) to the SLPH/CDC for reference testing. • Use the following link for specimen submission information: http://slph.state.nc.us/Microbiology/Mycobacteriology/default.asp
<p>RISK COMMUNICATION</p>	<ul style="list-style-type: none"> • NC DHHS Public Information Office (919) 733-9190 is available to assist local health departments as needed.