

# South Carolina 2015 Laboratory Reporting List

## Adapted from the South Carolina 2015 List of Reportable Conditions

South Carolina Law §44-29-10 and Regulation §61-20 require reporting of conditions on this list to the local public health department.

South Carolina Law §44-53-1380 requires reporting of all blood lead values in children under 6 years of age by laboratories.

**HIPAA: Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512)**

| <b>IMMEDIATELY REPORTABLE BY PHONE</b><br>All suspected and confirmed cases, including preliminary* laboratory results   | <b>URGENTLY REPORTABLE WITHIN 24 HOURS BY PHONE</b><br>All suspected and confirmed cases, including preliminary* laboratory results  | <b>REPORTABLE WITHIN 3 DAYS</b>  |
|--|--|--|
| <p>⚠️ Any case that may be caused by chemical, biological, or radiological threat, novel infectious agent, or any cluster of cases, or outbreak of a disease or condition that might pose a substantial risk of human morbidity or mortality (1) (5)</p>   | <p><b>PARASITIC</b><br/><i>Trichinella</i></p>   | <p><b>PARASITIC</b><br/><i>Babesia microti</i><br/><i>Cryptosporidium</i><br/><i>Cyclospora</i><br/><i>Giardia</i><br/><i>Plasmodium</i></p>   |
| <p><b>VIRAL</b></p> <ul style="list-style-type: none"> <li>Influenza A, avian or other novel strain</li> <li>Measles (Rubeola)</li> <li>Poliovirus</li> <li>Rabies virus (human)</li> <li>⚠️ Variola major (Smallpox)</li> <li>⚠️ Viral Hemorrhagic Fever agents (e.g., Ebola, Lassa, Marburg viruses)</li> </ul>  | <p><b>VIRAL</b></p> <ul style="list-style-type: none"> <li>Chikungunya (5)</li> <li>Dengue (<i>Flavivirus</i>) (5)</li> <li>Eastern Equine Encephalitis (EEE) (5)</li> <li>Hantavirus</li> <li>Hepatitis A, acute (IgM Ab + only)</li> <li>Hepatitis B, acute (IgM core Ab + only)</li> <li>Hepatitis E, acute (all positives)</li> <li>Influenza deaths (all ages)</li> <li>La Crosse Encephalitis (LAC) (5)</li> <li>Mumps virus</li> <li>Rubella</li> <li>St. Louis Encephalitis (SLE) (5)</li> <li>West Nile Virus (WNV) (5)</li> <li>Yellow Fever (<i>Flavivirus</i>)</li> </ul>  | <p><b>VIRAL</b></p> <ul style="list-style-type: none"> <li>Hepatitis B, C, &amp;D, all positive tests</li> <li>HIV-1 or HIV-2 infection</li> <li>HIV CD4 co receptor</li> <li>HIV CD4 T-lymphocyte count/percent – all results</li> <li>HIV HLA-B5701 and co-receptor assay</li> <li>HIV subtype, genotype, and phenotype</li> <li>HIV viral loads – all results</li> <li>Influenza                         <ul style="list-style-type: none"> <li>• Positive culture, RT-PCR, DFA, or IFA (2)</li> <li>• Lab-confirmed hospitalizations (6)</li> <li>• Positive rapid antigen tests (6)</li> </ul> </li> <li>Varicella</li> </ul>   |
| <p><b>BACTERIAL</b></p> <ul style="list-style-type: none"> <li>⚠️ <i>Bacillus anthracis</i> (5)</li> <li>⚠️ <i>Clostridium botulinum</i> or Botulinum toxin</li> <li><i>Neisseria meningitidis</i>, invasive (2) (3) (4) (5)</li> <li>⚠️ <i>Yersinia pestis</i> (5)</li> </ul>   | <p><b>BACTERIAL</b></p> <ul style="list-style-type: none"> <li><i>Bordetella pertussis</i></li> <li>⚠️ <i>Brucella</i> (5)</li> <li><i>Corynebacterium diphtheriae</i> (5)</li> <li>⚠️ <i>Coxiella burnetii</i></li> <li><i>Escherichia coli</i>, shiga toxin – producing (STEC) (5)</li> <li>⚠️ <i>Francisella tularensis</i> (5)</li> <li><i>Haemophilus influenzae</i>, all types, invasive (3) (5)</li> <li><i>Mycobacterium tuberculosis</i> (5) (7)</li> <li>⚠️ <i>Rickettsia prowazekii</i></li> <li><i>Salmonella typhi</i> (2) (5)</li> <li><i>Staphylococcus aureus</i>, vancomycin intermediate/resistant (VISA/VRSA) (2) (5)</li> <li><i>Treponema pallidum</i> (Darkfield exam positive)</li> <li><i>Vibrio</i> -all, including <i>V. cholerae</i> O1 and O139 (5)</li> </ul> | <p><b>BACTERIAL</b></p> <ul style="list-style-type: none"> <li><i>Anaplasma phagocytophilum</i></li> <li><i>Borrelia burgdorferi</i></li> <li><i>Campylobacter</i> (2)</li> <li>Chancroid (<i>Haemophilus ducreyi</i>)</li> <li>⚠️ <i>Chlamydia psittaci</i></li> <li><i>Chlamydia trachomatis</i>, genital site</li> <li><i>Clostridium tetani</i></li> <li><i>Clostridium difficile</i></li> <li><i>Ehrlichia</i></li> <li><i>Legionella</i> (5)</li> <li><i>Leptospira</i></li> <li><i>Listeria</i> (5)</li> <li><i>Mycobacterium leprae</i></li> <li><i>Neisseria gonorrhoeae</i> (2)</li> <li><i>Rickettsia rickettsii</i> (and other Spotted Fever group)</li> <li><i>Salmonella</i> (2) (5)</li> <li><i>Shigella</i> (2) (5)</li> <li><i>Streptococcus</i> group A, invasive disease (2) (3)</li> <li><i>Streptococcus</i> group B, age &lt; 90 days (2)</li> <li><i>Streptococcus pneumoniae</i>, invasive (3), include antibiotic resistance patterns (2)</li> <li>Syphilis, positive serologic test</li> <li><i>Yersinia</i>, not <i>pestis</i></li> </ul> |
| <p>⚠️ Potential agent of bioterrorism</p> <ol style="list-style-type: none"> <li>1. An outbreak is the occurrence of more cases of disease than normally expected within a specific place or group of people over a given period of time. Clinical specimens may be required.</li> <li>2. Antibiotic resistant organisms: resistant pneumococcus - MIC ≥ 2 µg/ml of penicillin G (or Oxacillin disc zone ≤ 19 mm) or resistance to any single drug accepted as effective treatment. The definition of resistance may differ between laboratories by test methods used to determine susceptibility. Reports should specify the site from which the isolate was obtained and the drug susceptibility profile.</li> <li>3. Invasive disease = isolated from normally sterile site: blood, bone, CSF, joint, pericardial, peritoneal or pleural fluid, protected bronchial sampling, or from lung aspirate/biopsy, necrotizing fasciitis, and cellulitis only if isolate is from a tissue biopsy. Always specify site of isolate.</li> <li>4. Report Gram-negative diplococci in blood or CSF.</li> <li>5. Labs must submit these isolates, positive serologies, or specimens to the DHEC Bureau of Laboratories for confirmatory testing and genotyping.</li> <li>6. Report aggregate totals weekly.</li> <li>7. Report all cases of suspect and confirmed tuberculosis (TB). A suspect case of TB is a person whom a health care provider believes, after weighing signs, symptoms, and/or laboratory evidence, to probably have TB. Centers for Disease Control and Prevention case definition of confirmed cases:<br/><a href="http://wwwn.cdc.gov/ndss/script/casedefDefault.aspx">http://wwwn.cdc.gov/ndss/script/casedefDefault.aspx</a></li> </ol> |  | <p><b>OTHER</b></p> <ul style="list-style-type: none"> <li>Lead tests, all results</li> </ul>  |

# South Carolina 2015 List of Reportable Conditions

## WHAT TO REPORT

### REPORT ALL SUSPECTED AND CONFIRMED CASES.

- Patient's name
- Patient's complete address, phone, county, date of birth, race, sex, last five digits of social security number
- Physician's name and phone number
- Name, institution, and phone number of person reporting
- Disease or condition
- Date of diagnosis
- Symptoms
- Date of onset of symptoms
- Lab results, specimen site, collection date
- If female, pregnancy status
- Patient status: In childcare, food-handler, healthcare worker, childcare worker, nursing home, prisoner/detainee, travel in last 4 weeks

## HOW TO REPORT

All mailed reports should be submitted in a confidential envelope (Use DHEC form 1129).

### **HIV, AIDS, and STDs (excluding Hepatitis):**

Call 1-800-277-0873; submit electronically via DHEC's web-based reporting system; or  
Mail to:  
Division of Surveillance & Technical Support  
Mills/Jarrett Complex  
Box 101106, Columbia, SC 29211

### **LEAD:**

Mail to:  
Division of Children's Health  
Mills/Jarrett Complex  
2100 Bull Street, Columbia, SC 29201

### **TUBERCULOSIS:**

Call the TB Control Division (803-898-0558).

### ALL OTHER CONDITIONS:

- Cases that are immediately (!) or urgently (\*) reportable should be reported by PHONE. If no response to regional numbers, use the statewide DHEC Bureau of Disease Control emergency contact number (1-888-847-0902).
- Cases that are reportable within 3 business days should be reported electronically via DHEC's web-based reporting system, mailed, or called. To learn about DHEC's web-based reporting system, call 1-800-917-2093.
- Report cases to the health department office (listed below) in the region in which the patient resides.

### MAIL TO:

#### **Lowcountry**

4050 Bridge View Drive, Suite 600  
N. Charleston, SC 29405  
Fax: (843) 953-0051

#### **Midlands**

2000 Hampton Street  
Columbia, SC 29204  
Fax: (803) 576-2993

#### **Pee Dee**

145 E. Cheves Street  
Florence, SC 29506  
Fax: (843) 661-4859

#### **Upstate**

200 University Ridge  
Greenville, SC 29602-2507  
Fax: (864) 282-4373

## REGIONAL PUBLIC HEALTH OFFICES

#### **Lowcountry**

**Berkeley, Charleston, Dorchester**  
Phone: (843) 953-0043  
Nights/Weekends: (843) 441-1091

#### **Beaufort, Colleton, Hampton, Jasper**

Phone: (843) 322-2453  
Nights / Weekends: (843) 441-1091

#### **Allendale, Bamberg, Calhoun, Orangeburg**

Phone: (803) 943-3878  
Nights / Weekends: (843) 441-1091

#### **Midlands**

**Kershaw, Lexington, Newberry,  
Richland**  
Phone: (803) 576-2749  
Nights/Weekends: (888) 801-1046

#### **Chester, Fairfield, Lancaster, York**

Phone: (803) 286-9948  
Nights / Weekends: (888) 801-1046

#### **Aiken, Barnwell, Edgefield, Saluda**

Phone: (803) 642-1618  
Nights / Weekends: (888) 801-1046

#### **Pee Dee**

**Chesterfield, Darlington, Dillon,  
Florence, Marlboro, Marion**  
Phone: (843) 661-4830  
Nights/Weekends: (843) 915-8845

#### **Clarendon, Lee, Sumter**

Phone: (803) 773-5511  
Nights/Weekends: (843) 915-8845

#### **Georgetown, Horry, Williamsburg**

Phone: (843) 915-8804  
Nights/Weekends: (843) 915-8845

#### **Upstate**

**Anderson, Oconee**  
Phone: (864) 260-5801  
Nights/Weekends: (866) 298-4442

#### **Abbeville, Greenwood,**

**Laurens, McCormick**  
Phone: (864) 227-5947  
Nights / Weekends: (866) 298-4442

#### **Cherokee, Greenville, Pickens, Spartanburg, Union**

Phone: (864) 372-3133  
Nights / Weekends: (866) 298-4442

For information on reportable conditions and updates  
to the 2015 List of Reportable Conditions, see  
<http://www.scdhec.gov/Health/FHPF/ReportDiseasesAdverseEvents/ReportableConditionsInSC/>

### **DHEC Bureau of Disease Control**

#### **Division of Acute Disease Epidemiology**

2100 Bull St • Columbia, SC 29201  
Phone: (803) 898-0861 • Fax: (803) 898-0897  
Nights / Weekends: 1-888-847-0902

