

Topic: Reporting, Surveillance, Isolation and Quarantine (Purpose, Authority, and Definitions)

CODE OF MASSACHUSETTS REGULATIONS TITLE 105: DEPARTMENT OF PUBLIC HEALTH CHAPTER 300.000: REPORTABLE DISEASES AND ISOLATION AND QUARANTINE REQUIREMENTS [105 CMR 300.000]

300.001: Purpose

The purpose of 105 CMR 300.000 is to list diseases dangerous to the public health as designated by the Department of Public Health and to establish reporting, surveillance, isolation and quarantine requirements. 105 CMR 300.000 is intended for application by local boards of health, hospitals, laboratories, physicians and other health care workers, veterinarians, education officials, and recreational program health officials, food industry officials, and the public.

300.002: Authority

105 CMR 300.000 is adopted under authority of M.G.L. c.111, §§ 1, 3, 5, 6, 7, 94C, 109, 110, 110B, 111 and 112, and M.G.L. c. 111D, § 6.

300.020: Definitions

The terms used in 105 CMR 300.000 shall be interpreted as follows unless the context or subject matter clearly requires a different interpretation.

Airborne Precautions. Measures designed to reduce the risk of transmission of infectious agents that may be suspended in the air in either small particle aerosols or dust particles. Patients in health care facilities must be given a private room with special air handling and ventilation (negative pressure), and respiratory protection is necessary when entering the patient's room.

Carrier. An individual who can tolerate an infection so as not to become ill, yet is able to transmit a disease causing organism to cause infection and illness in others.

Case or Patient. One who is ill, infected, injured or diagnosed with a reportable disease or injury.

Communicable. Ability of an infection to be transmitted from one person or animal to another.

Contact. A person who has been in such association with an infected person or animal or with a contaminated environment as to have had exposure capable of transmitting the infection to that person.

Contact Precautions. Measures designed to reduce the risk of transmission of infectious agents that can be spread through direct contact with the patient or indirect contact with potentially infectious items or surfaces. Gloves and gowns are required for all patient contact and contact with the patient's environment; strict hand hygiene practices must also be applied.

Counseling. Process by which individuals and groups learn to promote, maintain and/or restore health. Methods and procedures used in counseling must take account of the ways in which people develop various forms of behavior, of the factors that lead them to maintain or to alter their acquired behavior, and of the ways in which people acquire and use knowledge.

Date of Last Exposure. That point in time when exposure that would be expected to provide an opportunity for transmission of infection between a case or carrier and a susceptible person ends, or point in time when a case or carrier is no longer capable of transmitting illness or infection to others, whichever was more recent.

Department. The Massachusetts Department of Public Health.

Droplet Precautions. Measures designed to reduce the risk of transmission of infectious agents via large particle droplets that do not remain suspended in air, usually generated by coughing, sneezing or talking. Masks must be used, but gowns, gloves and special air handling are not needed.

Enteric Precautions. Measures designed to prevent direct or indirect fecal oral transmission of disease. Gowns shall be worn if soiling is likely, and gloves shall be worn for touching contaminated materials; strict hand hygiene practices must also be applied. Masks are not indicated.

Food. Any raw, cooked or processed edible substance, ice, beverage, medications, or ingredient used or intended for use or for sale in whole or in part for human consumption via the alimentary tract.

Food Handler. Any person directly preparing or handling food. This could include the owner, individual having supervisory or management duties, person on the payroll, family member, volunteer, person performing work under contractual agreement, or any other person working in a food handling facility. Any person who dispenses medications by hand, assists in feeding, or provides mouth care shall be considered food handlers for the purpose of 105 CMR 300.000. In health care facilities, this includes those who set up trays for patients to eat, feed or assist patients in eating, give oral medications or give mouth/denture care. In day care facilities, schools and community residential programs, this includes those who prepare food for clients to eat, feed or assist clients in eating or give oral medications.

Food Handling Facility. Any fixed or mobile place, structure or vehicle, whether permanent, seasonal or temporary, in which food is prepared, processed, stored or held for sale, whether at retail or wholesale, or for service on the premises or elsewhere, or where food is served or provided to the public with or without charge. This term does not include private homes where food is prepared or served for individual family consumption.

Food Handling Facility Employee. Any person directly preparing or handling food. This could include the owner, individual having supervisory or management duties, person on the payroll, family member, volunteer, person performing work under contractual agreement, or any other person working in a food handling facility. In health care facilities, this includes those who set up trays for patients to eat, feed or assist patients in eating, give oral medications or give mouth/denture care. In day care facilities, schools and community residential programs, this includes those who prepare food for clients to eat, feed or assist clients in eating or give oral medications.

Food Poisoning. Poisoning that results from eating foods contaminated with toxins. These toxins may occur naturally, as in certain mushrooms or seafoods; they may be chemical or biologic contaminants; or they may be metabolic products of infectious agents that are present in the food.

Health Care Provider. As defined in M.G.L. c. 111, § 1: "any doctor of medicine, osteopathy, or dental science, or a registered nurse, social worker, doctor of chiropractic, or psychologist licensed under the provisions of M.G.L. c. 112, or an intern, or a resident, fellow, or medical officer licensed under M.G.L. c. 112, § 9, or a hospital, clinic or nursing home licensed under the provisions of M.G.L. c. 111 and its agents and employees, or a public hospital and its agents and employees."

Health Care Worker. One who provides direct care to patients or who works in a setting where such care is provided.

Immunity. Possession of protective antibodies or cellular components sufficient to protect from infection and/or illness following exposure to an infectious agent (see also Resistance).

Incidence. A general term used to characterize the frequency of new occurrences of a disease, infection, or other event over a period of time and in relation to the population in which it occurs. Incidence is expressed as a rate, commonly the number of new cases during a prescribed time in a unit of population. For example, one may refer to the number of new cases of tuberculosis per 100,000 population per year.

Invasive Infection. Infection involving the bloodstream or internal organs, not including infection of the skin or mucous membranes. Invasive infection is usually established by the recovery of an etiologic agent from a usually sterile body fluid or tissue.

Isolation. Separation, for the period of communicability, of infected persons from others in such places and under such conditions as will prevent the direct or indirect transmission of an infectious agent to susceptible people or to those who may spread the agent to others. This applies also to animals (compare Quarantine).

Laboratory. A facility or place, however named, the purpose of which is to make biological, serological, chemical, immuno hematological, cytological, pathological, or other examinations of materials derived from a human body. This includes laboratories in hospitals and other facilities.

Laboratory Test Diagnostic of HIV Infection. A laboratory test approved for clinical use by the U.S. Food and Drug Administration that indicates the presence of antibody to HIV, HIV structural components, or HIV ribonucleic acid in blood and other body fluid.

Non-name Reporting System. A department designed reporting system for cases of infection with human immunodeficiency virus (HIV) that contains no patient identifying information and protects the confidentiality of the patient in compliance with M.G.L. c. 111, § 70F.

Outbreak or Cluster. The occurrence in a community, facility, workplace or region of cases of an illness clearly in excess of the number of cases usually expected. The number of cases indicating an outbreak or cluster will vary according to the infectious agent or the site conditions/hazards, size and type of population exposed, previous experience or lack of exposure to the disease, and time and place of occurrence. Outbreaks or clusters are therefore identified by significant increases in the usual frequency of the disease in the same area, among the specified population, at the same season of the year.

Personal Surveillance. The practice of close medical or other supervision of contacts without restricting their movements in order to promote prompt recognition of infection or illness.

Prophylaxis. The administration of a drug or biologic agent to prevent the development of an infection or limit the progression of an infection.

Quarantine. Restricting the freedom of movement of well persons or domestic animals who have been exposed to a communicable disease for a period of time relating to the usual incubation period of the disease, in order to prevent effective contact with those not so exposed (compare Isolation).

Report of a Disease. An official notice to the appropriate authority of the occurrence of a specified disease in people or animals, directly by telephone, in writing, by facsimile, or by electronic means.

Resistance. The sum total of body mechanisms which interpose barriers to the progress of invasion or multiplication of infectious agents or to damage by their toxic products.

(1) **Immunity** is that resistance usually associated with possessing antibodies or cells having a specific activity against the etiologic agent of an infectious disease. Passive immunity is attained either naturally by maternal transfer or artificially by introducing specific protective antibodies. Passive immunity is of brief duration. Active immunity is attained by infection, with or without symptoms, or by introducing certain fractions or products of the infectious agent or the agent itself in a killed, modified or variant form.

(2) **Natural resistance** is the ability to resist disease independently of antibodies or a specific cellular response. It commonly rests in anatomic, cellular or physiologic characteristics of the host. It may be genetic or acquired, permanent or temporary.

Risk. The probability of an individual developing a given disease or experiencing a change in health status over a specific period of time.

Standard Precautions. Refers to consistent and prudent preventive measures to be used at all times regardless of patient's infection status. The Department adopts, by reference, as standard precautions for infection control, the most current version of the guidelines on the prevention of transmission of infection published by the U.S. Centers for Disease Control and Prevention and its Healthcare Infection Control Practices Advisory Committee.

Surveillance of Disease. Monitoring the occurrence and spread of disease and indications of such occurrence and spread.

Susceptible. A person or animal not possessing resistance to a pathogenic agent. Such a person or animal is liable to contract a disease if or when significantly exposed to such agent.

Suspect Case. A person or animal with clinical and/or laboratory evidence suggestive of the existence of a disease or condition dangerous to the public health but prior to the confirmation of such a diagnosis.

Unusual Illness. An illness, by any indication, occurring for the first time or under rare circumstances, or an illness associated with signs and symptoms not otherwise expected to occur based on the known or presumed etiology of the illness.

Work related Disease. A disease or condition which is believed to be caused or aggravated by conditions in the individual's workplace.

Work related Serious Traumatic Injury to a Person Less Than 18 Years of Age. An injury to a person less than 18 years of age which:

(1) results in death, hospitalization, or, in the judgment of the treating physician, results in significant scarring or disfigurement, permanent disability, significant loss of consciousness, or loss of a body part or bodily function; or which

(2) the physician determines is less significant but is of the same or similar nature to injuries previously sustained at the same place of employment.

Zoonotic. Infectious disease of animals that can be transmitted to humans.