



Title: Communicable Disease Reporting and Investigation
Procedure #: N_202_1_PRO

Creation Date:	11.03.2025	Last Approved Date:	Reviewed Annually			
Description:	A procedure to guide staff in timely investigation, public health interventions, and prevention of reportable communicable diseases and conditions.					
PHAB Domain/ Standard/ Measure:	2.1.3 A: Ensure 24/7 access to resources for rapid detection, investigation, containment and mitigation of health problems and environmental public health hazards. 2.1.4 A: Maintain protocols for investigation of public health issues. 2.1.5 A: Maintain protocols for containment and mitigation of public health problems and environmental public health hazards.					
Statutory Authority/ Evidence Base/ Links:	WI State Statute Chapter 252 Communicable Diseases WI Administrative Code Chapter DHS 145 - Appendix A Communicable Diseases and Other Notifiable Conditions					
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Policy Approval Tracking						
Created/ Reviewed/ Revised Date	Legal Services Approval Date	Board of Health Approval Date	Council Approval Date	Health Officer or Designee Signature (Name/Title)		
Created 11.03.2025	11.03.2025					

Purpose

Guide staff in timely investigation, public health interventions, and prevention of reportable communicable diseases and conditions.



Procedure

1. Intake nurse will process the initiation of all communicable disease reports as they come into the health department. Reports may be received by Wisconsin Electronic Disease Surveillance System (WEDSS), phone, fax, or use of the State report forms found on the WI DHS Disease Reporting websiteⁱ.
2. If an outbreak is suspected, follow appropriate guidance and notify Supervisor and Health Officer. For WEDSS specific outbreak guidance, please refer to the WI DHS WEDSS Outbreak Reportingⁱⁱ
 - a. GI Outbreaks in LTCFⁱⁱⁱ
 - b. Foodborne and Waterborne Outbreaks^{iv}
 - c. Respiratory Outbreaks^v
3. Establish Local Public Health Agency (LPHA) jurisdiction and refer to jurisdiction of residence if outside Appleton city limits.

Disease Reporting received not via WEDSS:

4. Reporting examples include but not limited to paper reports/line lists/other provider notifications. When these are received by Appleton Health Department the following will occur:
 - a. Check to see if individual is in WEDSS Reporter by searching for both **Name & Date of Birth** separately.
 - b. If the person is in the system, refer to New Disease Incident Timeframes^{vi}
 - c. Scan the report into WEDSS file cabinet for that disease incident.
 - d. If client is in WEDSS system without a matching disease incident create a “new disease incident” and scan document into WEDSS file cabinet. Instructions found here: (Staging in WEDSS^{vii} and/or Disease Incident Merging in WEDSS^{viii})

Disease Reporting via WEDSS:

5. The Intake nurse will check the staging area and jurisdiction review in WEDSS first thing in the morning, and periodically throughout the day, for any new communicable disease reports.
 - a. Verify jurisdiction and transfer as appropriate.
 - b. If Category I, process immediately as indicated in New Disease Incident Timeframes and ensure that Nursing Supervisor and Health Officer are notified.
 - c. For Category II:
Utilize the WI DHS Diseases and Conditions Index^{ix} and/or WI Division of Public Health epidemiologists and consultants contacts^x for guidance on required follow up for reportable diseases and conditions.
 - d. Importing from Staging to Jurisdiction: follow Staging in WEDSS. Before importing, always search by **both person name and date of birth separately**



before entering as a new person.

- e. Whenever possible, import web reports before lab report. If lab report is imported first, documents must then be merged when web report is received. See Disease Incident Merging in WEDSS. If uncertain about anything shown in WEDSS Staging or Jurisdiction, discuss with Nursing Supervisor.

Investigation and Follow-Up:

6. All Category I diseases will be processed as indicated on the New Disease Incident Timeframes immediately and the Nursing Supervisor and Health Officer shall be notified. The Nursing Supervisor or the Health Officer will determine the need to notify other entities (Wisconsin DHS, other local health departments, medical providers).
7. Review cases in WEDSS and change to "Open Local Jurisdiction".
8. The Nursing Supervisor should be used as a reference for questions or problems. Nurses shall use appropriate Communicable Disease resources: WI DHS Diseases and Conditions^{xi}, Control of Communicable Diseases Manual (Heymann)^{xii}, AAP Red Book: Report of the Committee on Infectious Diseases^{xiii}, WI Division of Public Health epidemiologists and consultants contacts^{xiv} to guide disease investigation and control.
9. Initiate follow up on assigned reportable diseases. The nurse assigned to the communicable disease investigation shall use discretion and confidentiality in contacting the client via telephone calls, texts, letters, home visits, school visits or employment setting, depending on the age of the client and the threat of disease communicability to the public.
10. Agency specific follow up:
 - a. STIs:
STIs will be followed up by PHN. Once treatment information is obtained, three phone call or text attempts will be made. These should be at different times of the day. If unable to reach STI client, an attempt to reach via letter will be made. If no response after letter is sent, document and close out in WEDSS.
 - b. Perinatal Hepatitis B:
Import perinatal Hepatitis B labs/case reports into Jurisdiction Review and assign to appropriate PHN.
 - c. LTBI and LTBI Lab Only:
Import into Jurisdiction Review and assign to Intake.
11. If during a case investigation, collection of specimens is warranted, Appleton Health Department may submit specimens to the Wisconsin State Laboratory of Hygiene for analysis in an epidemiological investigation in accordance with the guidelines established by the WI State Lab of Hygiene. Obtain Fee Exempt authorization from Nursing Supervisor, Health Officer, and/or WI State Epidemiologist staff using our Fee Exempt Code 503.
12. If during a case investigation there are contacts to the case that need follow up, they should be entered in as a contact in WEDSS. To enter a contact in WEDSS, follow LTHD Basics 2 - Case Management^{xv}



- a. If client already exists in WEDSS, find out why they are in the system. If current contact investigation or disease incident exists for this episode and follow up is completed, nothing further needs to be done.
- b. If client resides in City of Appleton and needs follow up, assign client to self, then click on "Create Investigation" and follow up. Make sure that you click submit when done.
- c. If not in the City of Appleton, create a case investigation, assign it to the correct jurisdiction and make a courtesy phone call, as appropriate, to the correct jurisdiction.

13. Upon completion of the case investigation, the nurse will ensure that all relevant documentation is charted and/or scanned into the electronic file cabinet in WEDSS. Close case by setting Process Status to "Sent to State" or "Final".

14. Wisconsin Department of Health – WEDSS will be the record holder for communicable disease records for the City of Appleton Health Department. Once a record has been scanned into the electronic file cabinet of the disease incident in WEDSS, the paper record can be shredded.

Definitions

WEDSS – Wisconsin Electronic Disease Surveillance System a secure, web-based system designed to facilitate reporting, investigation, and surveillance of communicable diseases in Wisconsin. ^[68]

Username and password required.

Intake Nurse – Public Health Nurse trained to do communicable disease follow up, and other Intake duties as assigned

STIs – Sexually Transmitted Infection

LTBI – Latent Tuberculosis Infection

Attachments

- Wisconsin Childhood Communicable Diseases Chart:
<https://www.dhs.wisconsin.gov/disease/childhood-communicable-diseases.htm>

ⁱ WI DHS Disease Reporting website
<https://www.dhs.wisconsin.gov/disease/reporting.htm>



ii WI DHS [WEDSS Outbreak Reporting](#)

iii [GI Outbreaks in LTCF](#)

iv [Foodborne and Waterborne Outbreaks](#)

v [Respiratory Outbreaks](#)

vi [New Disease Incident Timeframes](#)

vii [Staging in WEDSS](#)

viii [Disease Incident Merging in WEDSS](#)

ix WI DHS Diseases and Conditions Index

<https://www.dhs.wisconsin.gov/disease/index.htm>

x Wisconsin DHS Communicable Diseases Contact List by Disease

[DHS Communicable Disease Contacts](#)

xi WI DHS Diseases and Conditions Index

<https://www.dhs.wisconsin.gov/disease/index.htm>

xii [Control of Communicable Diseases Manual](#) (Heymann)

<https://www.apha.org/publications/published-books/ccdm>

xiii [AAP Red Book: Report of the Committee on Infectious Diseases](#)

<https://publications.aap.org/redbook>

xiv Wisconsin DHS Communicable Diseases Contact List by Disease

[DHS Communicable Disease Contacts](#)

xv [LTHD Basics 2 - Case Management](#)