

/\* North Dakota's administrative code contains the usual reportable disease regulations, as well as post-mortem handling and food handling regulations. \*/

## CHAPTER 33-05-02 NOTIFICATION OF BLOOD AND BODY FLUID PRECAUTION

### Section

33-05-02-01	Definitions
33-05-02-02	Notification Required of Death From Post-Mortem Communicable Disease
33-05-02-03	Disclosure Limited
33-05-02-04	Violations Reported to Appropriate Licensing Board

33-05-02-01. Definitions. For purposes of this chapter, the term post-mortem communicable diseases shall include the following:

1. Viral hepatitis (any etiology).
2. Tuberculosis.
3. Acquired Immune Deficiency Syndrome (AIDS).
4. Plague.
5. Creutzfeldt-Jakob.
6. Rabies.
7. Meningococcal meningitis.

33-05-02-02. Notification required of death from post-mortem communicable diseases. When any person dies who has been diagnosed or suspected as having a post-mortem communicable disease, a written notice stating "BLOOD AND BODY FLUIDS PRECAUTIONS SHOULD BE OBSERVED" must be securely attached to the body in a prominent location thereon so it can be easily seen when the body is removed for disposition as follows:

1. If the person dies in a hospital or other health care facility, the notice must be prepared and placed by the attending physician or other health care professional or

representative on behalf of the hospital or health care facility.

2. If the person dies outside of a hospital or health care facility, the notice must be prepared and placed by the attending physician, or in the absence of an attending physician, by the examining coroner.

Any person who removes a dead human body for disposition which has a notice attached pursuant to this chapter shall ensure that such notice remains attached to the dead body until the body is presented to any embalmer, funeral director, or other person taking possession of the dead body.

33-05-02-03. Disclosure limited. Any notifications required to be made pursuant to section 33-05-02-03 are privileged and confidential and may be disclosed only if one of the following applies:

1. Disclosure is required by any state or federal law.

2. Disclosure is made by a physician pursuant to a state or federal law permitting disclosure.

3. Disclosure is for research purposes and does not reveal either the identity of the deceased or information by which the identity of the deceased could be determined.

4. Disclosure involves information regarding a deceased minor and the disclosure is made to the parent or guardian of that minor.

5. Disclosure is made to the person who removes the dead human body or is made in the ordinary course of business to any employee or agent of any person or entity authorized or required under this chapter to receive or report that information.

33-05-02-04. Violations reported to appropriate licensing board. Any person practicing an occupation, trade, or profession for which the license, permit, certificate, or registration is required from any state agency, board, commission, or department who willfully violates any provision of this chapter must be reported to such agency, board, commission, or department for such action as it may determine appropriate.

## ARTICLE 33-06

### REPORTABLE DISEASES

#### Chapter

33-06-01 Diseases Designated as Reportable

33-06-02 Methods of Reporting

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- 33-06-04 Control of Specific Diseases
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CHAPTER 33-06-01  
DISEASES DESIGNATED AS REPORTABLE  
Section  
33-06-01-01 Reportable Diseases

33-06-01-01. Reportable diseases. All reportable diseases shall be confidential and not open to inspection. The following diseases are hereby declared to be reportable in this state.

1. Acquired immune deficiency syndrome (A.I.D.S.).
2. Amebiasis.
3. Anthrax.
4. Blastomycosis.
5. Botulism.
6. Brucellosis.
7. Campylobacter enteritis.
8. Chancroid.
9. Chickenpox (varicella).
10. Chlamydial infections.
11. Cholera.
12. Diphtheria.
13. E. coli 0157:H7 infection.
14. Encephalitis (specify etiology).
15. Foodborne or waterborne outbreaks.
16. Giardiasis.
17. Gonorrhea.

18. Granuloma inguinale.
19. Haemophilus influenzae b.
20. Hemolytic uremic syndrome.
21. Hepatitis (specify type).
22. Herpes simplex (genital).
23. Histoplasmosis.
24. Human immunodeficiency virus infection.
25. Influenza.
26. Lead poisoning.
27. Legionellosis.
28. Leprosy.
29. Leptospirosis.
30. Lyme disease.
31. Lymphogranuloma venereum.
32. Malaria.
33. Measles (rubeola).
34. Meningitis (specify etiology).
35. Mumps.
36. Nosocomial infections.
37. Ornithosis (Psittacosis).
38. Pertussis.
39. Plague.
40. Poliomyelitis.
41. Rabies.
42. Reye's syndrome.
43. Rocky Mountain spotted fever.
44. Rubella.
45. Salmonellosis.
46. Scabies (in institutions).
47. Shigellosis.
48. Syphilis.
49. Tetanus.
50. Toxic-shock syndrome.
51. Trichinosis.
52. Tuberculosis.
53. Tularemia.
54. Typhoid fever.

## CHAPTER 33-06-02

### METHODS OF REPORTING

#### Section

33-06-02-01          Methods of Reporting

33-06-02-01.          Methods of reporting.

1. Printed forms available. The reporting forms will be

provided by the state department of health. For those diseases which may require investigation to prevent spread of the disease, forms are available which specify the patient's name and address, age, sex, occupation, probable source of infection, date of exposure, date of onset, and name and address of the person making the report. For those diseases which do not require investigations, forms are available for reporting the diseases by number only.

2. Morbidity reports. All morbidity reports must be made as soon as clinical diagnosis is made.

3. Telephonic reports. Physicians shall notify the state health officer by telephone of any unusual outbreak of food infections and poisonings, and of any case of leprosy, bubonic plague, rabies, anthrax, psittacosis, botulism, Rocky Mountain spotted fever, rat-bite fever, and such other diseases as the state department of health may from time-to-time designate.

4. Teacher must report suspected cases. Whenever any school principal or teacher in any private, public, or parochial school has reason to suspect that any pupil is suffering from or has been exposed to any communicable disease, such principal or teacher shall send the child home with instructions to see the child's family physician. Any pupil so excluded shall not be permitted to attend school again until the pupil shall present a certificate from a physician licensed to practice medicine in North Dakota or from the local health department stating that the child is not suffering from a communicable disease and that it is safe for the child to return to school. Such principal or teacher shall also report any such suspected case to the local health officer, who, upon receipt of such report, shall use the officer's best judgment as to the necessity for further investigating the case.

## CHAPTER 33-06-03

### HEALTH OFFICER INVESTIGATION

#### Section

33-06-03-01	Infectious or Communicable Disease
33-06-03-02	Insanitary Condition
33-06-03-03	School May Be Closed
33-06-03-04	Disclosure of Records

33-06-03-01. Infectious or communicable disease. When any infectious or communicable disease is reported to a health officer or when the health officer has reason to suspect that such disease exists within the officer's jurisdiction, the officer shall make a thorough investigation, if necessary, and if

such disease is found to exist, the officer shall take such steps as are required by the laws of the state and by this chapter. If upon investigation the health officer shall find that a disease for which isolation is required has recently existed on any premises within the officer's jurisdiction, the officer shall place such premises under surveillance until the expiration of the incubation period.

33-06-03-02.       Insanitary condition. Each health officer shall investigate whenever and wherever the officer has reason to suspect that any insanitary condition dangerous to public health exists within the officer's jurisdiction, and if such insanitary condition is found to exist, the officer shall order its removal within a specified time by a written notice served on the owner or agent of the property whereon such insanitary condition exists. If the owner or agent shall fail to remove or remedy such insanitary condition within the time specified in such written notice, the health officer shall bring the matter to the attention of the county attorney and, if necessary, file a complaint against such owner or agent for maintaining an insanitary condition dangerous to public health and in violation of the laws of the state and regulations of the state department of health and consolidated laboratories.

33-06-03-03.       School may be closed. Whenever, in the judgment of the state department of health and consolidated laboratories or of any county or city health officer, it is advisable to close the schools because of the prevalence of any contagious or infectious disease or diseases, the health officer shall serve written notice upon the board of school directors or the responsible officials of any private, parochial, public, or Sunday school in the same district in which such disease or diseases prevail, directing them to close all schools immediately nor shall any such schools be reopened until ordered by the proper health official.

33-06-03-04.       Disclosure of records. Information contained in disease control records and held by the state department of health and consolidated laboratories is strictly confidential information. Information contained in disease control records must include all information, records of interviews, written reports, statements, notes, memoranda, or other data procured by the department in connection with disease control, or carried on by the department jointly with other persons, agencies, or organizations, or procured by such other persons, agencies, or organizations, for the purpose of disease control or for such

purposes of reducing the morbidity or mortality from any cause or condition of health.

No officer or employee of the state department of health and consolidated laboratories may be examined in any judicial, executive, legislative, or other proceeding regarding the existence or content of any individual's report retained by the department for disease control. The information may not be released, shared with any agency or institution, or made public, upon subpoena, search warrant, discovery proceedings, or otherwise, except that:

1. Release may be made of medical or epidemiologic information for statistical purposes in a manner such that no individual person can be identified.
2. Release may be made of medical or epidemiologic information to medical personnel to the extent necessary to protect the health or life of any individual.
3. Release may be made to the patient's attending physician, or the attending physician's designated agent.
4. Release may be made as otherwise provided by statute.

33-06-04-10. Sexually transmitted diseases.

1. Contact tracing is appropriate' for the following sexually transmitted diseases:
  - a. Human immunodeficiency virus (HIV) infection;
  - b. Acquired immunodeficiency syndrome (AIDS);
  - c. Chlamydia;
  - d. Gonorrhea;
  - e. Hepatitis B virus (HBV); and
  - f. Syphilis.
2. Individuals infected with a sexually transmitted disease for which contact tracing is appropriate shall disclose information concerning the source of the infection to their attending physician or public health officer.
3. Information obtained pursuant to this section will be used solely for epidemiological purposes.

33-06-04-11. Vaccines. Private physicians, clinics, and hospitals in North Dakota providing vaccinations (immunizations) with vaccine obtained at no cost from the department will limit their charges to one-half the cost incurred by the department in purchasing the vaccine. The vaccine cost per dose appears on the packing slip shipped with every vaccine order.

CHAPTER 33-06-05.2

STUDENTS WITH SIGNIFICANT CONTAGIOUS DISEASES

## Section

- 33-06-05.2-01 Student Attendance
- 33-06-05.2-02 Confidentiality
- 33-06-05.2-03 Individual Student Needs

33-06-05.2-01. Student attendance. No student may be prohibited from attending the institution solely because they have or they are perceived to have a significant contagious disease. If the student is well enough to attend the institution, and does not constitute a public health threat, as determined by the decisionmaker the student must be permitted to attend the institution. If the student is unable to attend regular class instruction or requires special consideration either special provisions or individual video education programs must be provided for the student.

33-06-05.2-02. Confidentiality. Unless disclosed by the affected person, their parent or guardian, or their personal physician, the individual may be informed of an affected individual's infection. In order to eliminate discrimination, the local governing body shall develop policies concerning the comprehensive application of universal precautions throughout the institution.

33-06-05.2-03. Individual student needs. If an affected student is unable to participate in regular classroom instruction, either reasonable accommodations, special provisions, or an individualized education program will be provided.

## CHAPTER 33-06-05.3

### EMPLOYEES WITH SIGNIFICANT CONTAGIOUS DISEASES

#### Section

- 33-06-05.3-01 Standards for Employment
- 33-06-05.3-02 Confidentiality
- 33-06-05.3-03 Reasonable Accommodations

33-06-05.3-01. Standards for employment. No employee or potential employee may be terminated or prevented from becoming employed at the institution solely because they have or they are perceived to have a significant contagious disease. If the employee is well enough to perform their job and does not constitute a public health threat to others, as determined by a personal physician, the employee must be permitted to perform the duties.

33-06-05.3-02. Confidentiality. Unless disclosed by the affected person, or their personal physician, no disclosure of an affected



individual's condition may be made. In order to eliminate discrimination, the local governing body should develop policies concerning the comprehensive application of universal precautions throughout the institution.

33-06-05.3-03. Reasonable accommodations. The institution shall consider and implement reasonable accommodations to allow the affected individual to become an employee or continue as an employee.

#### CHAPTER 33-06-05.4

#### TREATMENT OF INDEPENDENT CONTRACTORS WITH SIGNIFICANT CONTAGIOUS DISEASES

##### Section

33-06-05.4-01 Standards of Contracting for Independent Contractors

33-06-05.4-02 Confidentiality

33-06-05.4-03 Reasonable Accommodations

33-06-05.4-01. Standards of contracting for independent contractors. No independent contractor may be terminated or prohibited from contracting with the institution solely because they have or they are perceived to have a significant contagious disease. If the independent contractor is capable of performing the work, or reasonable accommodations can be made to allow the independent contractor to perform the work, and the independent contractor does not constitute a public health threat to others, as determined by a personal physician, the independent contractor must be permitted to contract with the institution.

33-06-05.4-02. Confidentiality. Unless disclosed by the affected person, or their personal physician, no individual may be informed of an affected individual's infection. In order to eliminate discrimination, the local governing body should develop policies concerning the comprehensive application of universal precautions throughout the institution.

33-06-05.4-03. Reasonable accommodations. The institution shall consider and implement reasonable accommodations to allow the affected individual to contract as an independent contractor or to continue an existing contract as an independent contractor.

#### CHAPTER 33-06-05.5

#### RELATIONS WITH THE PUBLIC

##### Section

33-06-05.5-01 Dissemination of Information

## 33-06-05.5-02 Procedure for Addressing Public Knowledge of Affected Individuals at an Institution

33-06-05.5-01. Dissemination of information. Except as required by law, information concerning the identity and Status of an affected individual may not be released to the public. No release may be made of any information either confirming or denying the presence within the institution setting of a person who has contracted a significant contagious disease.

33-06-05.5-02. Procedure for addressing public knowledge of affected individuals at an institution. The institution shall develop a procedure for addressing situations when information concerning an affected individual becomes public. The procedure adopted under this section must include the identification of a single spokesperson for the institution, a means of protecting against possible breeches of confidentiality, and a plan for conflict resolution which may include a request for assistance from an appropriate consultant.

## CHAPTER 33-06-05.6

### EDUCATION

#### Section

#### 33-06-05.6-01 Education Concerning Significant Contagious Diseases Required

33-06-05.6-01. Education concerning significant contagious diseases required. Each institution shall adopt and implement a policy requiring the education of all students, employees, and independent contractors. The policy adopted must include information concerning the means of transmission of significant contagious diseases in an institutional setting, the means of protecting against contracting the disease in an institutional setting, and the use of universal precautions.

## CHAPTER 33-06-06

### FOOD HANDLERS

#### Section

#### 33-06-06-01 Handling of Food Forbidden in Certain Cases

33-06-06-01. Handling of food forbidden in certain cases.

1. Handling of food products for sale. No person infected with or suspected of being a carrier of any communicable disease shall handle food or food products intended for sale which are liable to convey infective material.

2. Contacts of case in handling food. No person who resides, boards, or lodges in a household where the person comes

In contact with any person infected with any communicable or infectious disease shall handle food or food products intended for sale or human consumption.

3. Serving of food. No waiter, waitress, cook, or other person of a boarding house, hotel, restaurant, or other place where food is served, who lodges or visits in a household where the person comes in contact with any person infected with any communicable or infectious disease, or is a carrier of any other communicable disease, or is infectious with such a disease shall prepare, serve, or handle food for others in any manner whatsoever.

#### Chapter 33-06-07

##### Laboratory Specimens for carriers of disease

###### Section

###### 33-06-07-01 Specimens to be Submitted

33-06-07-01. Specimens to be submitted. Any person suspected of being a carrier of disease that may be spread through the person's bodily excretions or discharges or in any other way shall on request of any health officer of North Dakota submit to the state department of health specimens of such bodily excretions or discharges in the manner and amount, at such intervals, and under such supervision as prescribed by the state health officer.

#### CHAPTER 33-06-08

##### Section

###### 33-06-08-01 Use of Isolation Requirements

33-06-08-01. Use of isolation requirements.

1. Exposure in an infectious state. The health officer or an attending physician of a person with communicable disease may, in the officer's or physician's judgment, forbid the person with the case in an infectious state from exposing other noninfected individuals to the person's infection.

2. Measures on the control. The health officer or an attending physician of a person with a communicable disease may require restrictive or corrective measures which apply to the control of a specific disease.

#### CHAPTER 33-06-10

##### DISINFECTION

###### Section

###### 33-06-10-01 Disinfection, Fumigation, and Renovation

###### 33-06-10-01. Disinfection, fumigation, and renovation.

1. Definition. "Disinfection" means killing of infectious agents outside the body by chemical germicides, or boiling water.
2. Disinfection. Disinfection should be applied immediately after the discharge of infectious material from the body of an infected person or after the soiling of articles with such infectious discharges; all personal contacts with such discharges or articles should be prevented prior to disinfection to the extent possible.
3. Disinfection of school buildings. Whenever any pupil, janitor, or teacher in any public, private or parochial school is afflicted with any infectious or contagious disease for which disinfection is required, the local health officer shall have the authority to require disinfection of the school or school rooms, if in the local health officer's medical opinion this would prevent the further spread of the disease.
4. Fumigation. Fumigation is not an effective means of disinfection and is not recommended except where the destruction of insects, mosquitoes, body lice, and rodent such as rats, is accomplished by the employment of gaseous agents.
5. Renovation. When in the judgment of the health officer the circumstances and conditions of the premises or the nature of the disease seem to warrant it, a thorough renovation shall be required in addition to disinfection.

## CHAPTER 33-06-15

### PREPARATION OF BODIES AND TRANSPORTATION

#### Section

#### 33-06-15-01 Preparation of Bodies with Certain Communicable Diseases and Transportation of the Dead

33-06-15-01. Preparation of bodies with certain communicable diseases and transportation of the dead.

1. Communicable diseases. The following requirements shall be met by funeral directors for bodies dead from these contagious or infectious diseases - anthrax, cholera, meningococcus meningitis, plague, smallpox, and tuberculosis:
  - a. Only a licensed embalmer or an assistant who is closely supervised by a licensed embalmer shall accept and prepare the body.
  - b. In the preparation of the body, appropriate outer garments and rubber gloves shall be worn.
  - c. The body shall be thoroughly embalmed with an approved disinfecting fluid by arterial and cavity injection, all orifices and any discharging sinuses closed with absorbent cotton, and the body washed with an appropriate disinfecting fluid.  
No embalming fluid containing compounds of arsenic, mercury,

zinc, or other highly poisonous metals shall be sold or used in North Dakota for the embalming of dead human bodies for burial.

d. Following the preparation, the instruments shall be sterilized by boiling or placing in an antiseptic solution, and the hands shall be washed with soap and water.

e. Without delay, the body shall receive the finishing preparation, placed in a casket, and the casket permanently closed. The casket may be provided with transparent material of sufficient dimensions to disclose the face.

f. Bodies prepared as herein stated may be accepted for transportation.

## 2. Transportation.

a. The bodies of those dead from causes other than listed under subsection 1 may be received for transportation without embalming providing they reach their destination within twenty-four hours from the time of death. Destination shall be considered the burial, cremation, or final disposition of the body. If the body cannot reach its destination within the prescribed twenty-four hours, it must be embalmed.

b. When the transportation requirements do not apply, embalming is not required if the body is buried, cremated, or is given final disposition within forty-eight hours after death.

c. Storage of a body during the winter months when burial is difficult shall not be considered final disposition.