



BIOGENIX

COMMUNICATION OF INFECTIOUS DISEASES

NAME		DESIGNATION	SIGNATURE	DATE
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COMMUNICATION OF INFECTIOUS DISEASES
CODE: BG/PP/INF/010

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

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REVIEW DATE: 30/06/2022

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4 POLICY STATEMENT:

- 4.1 It is the responsibility of Biogenix Laboratory to report all suspected and confirmed notifiable communicable disease through Infection Control Officer or Laboratory Coordinator.
- 4.2 Timely communication of positive results of HIV, HBsAg & HCV is paramount owing to their capabilities to be life altering and life threatening entities.
- 4.3 Laboratory staff should know how to respond to a positive result for HIV, HBsAg and HCV as it can occur on a day to day testing.

5 PURPOSE

- 5.1 To provide guidelines for timely reporting of infectious diseases in Biogenix laboratory.

6 SCOPE

- 6.1 The scope of this policy extends to infectious disease testing in the Biogenix.

7 DEFINITIONS

- 7.1 N/A

8 ACRONYMS

- 8.1 PPE – Personal Protective Equipment
- 8.2 DOH – Department of Health

9 RESPONSIBILITIES





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- 9.1 It is the responsibility of the technical staff performing infectious diseases testing to intimate the pathologist on duty about the positive findings. Also responsible to follow the protocol and pathologist instructions in handling positive results.
- 9.2 The Pathologist on duty is responsible for making the decision about further follow-up when a positive result arises.
- 9.3 Laboratory Director is responsible for setting the protocol for infectious disease testing and management in Biogenix Laboratory.
- 9.4 Infection Control Officer is responsible for acquiring the positive results for infectious diseases and reporting them and aid in sending samples for confirmation to the preventive medicine department.

10 PROCEDURE

- 10.1 Prompt intimation of the diagnosis of Human Immunodeficiency Virus to the referring clinician or clinic or hospital in a timely manner should be made sure.
- 10.2 Communication of other serious infections diagnosed in Biogenix laboratory is important as the spread to the other hospital patients/workers can be prevented by necessary infection control measures and early treatment can be started to reduce morbidity and mortality.
- 10.3 When intimated the same should be entered in the panic value log as a documentation.
- 10.4 All notifiable diseases should be conveyed to the infection control officer for the completion of statutory reporting to the Social and Preventive medicine department.
- 10.5 Infection Control Officer notify all notifiable diseases through Communicable Diseases electronic notification system.
 - Complete all mandated data fields as per the specifications of the Communicable Diseases electronic notification system;
 - Submit to HAAD accurate Communicable Diseases data for each communicable disease groups provided at Appendix 1, within the following timeframes:
 - Group A: Communicable diseases that require notification to HAAD within less than 2 hours of initial diagnosis (suspected or confirmed). Table 1, red, see Annexure 1





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- Group B: Communicable diseases that require notification to HAAD one calendar day from initial diagnosis (suspected or confirmed). Table 2, blue see Annexure 1
- Group C: Communicable diseases that require notification to the HAAD within seven calendar days from initial diagnosis (suspected or confirmed). Table 3, green see Annexure 1.
- Ensure that all sampling and laboratory testing for communicable diseases complies with the requirements of the HAAD Clinical Laboratory Standards available from the HAAD website at: www.haad.ae (Policies & Circulars, HAAD Policies & Regulation).

11 CROSS REFERENCE:

11.1 DOH Guidelines.

12 RELEVANT DOCUMENTS & RECORDS:

12.1 Annexure 01 - List of Reportable Diseases to be Reported to DOH, Abu Dhabi.





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Table.1: Group A Immediately reportable diseases	Table.2: Group B Daily reportable diseases	Table.2: Group C Weekly reportable diseases
<p>Anthrax </p> <p>Botulism </p> <p>Cholera </p> <p>Dengue Fever </p> <p>Diphtheria </p> <p>Food borne Illness Specify: </p> <p>Human Immunodeficiency Virus (HIV)/AIDS </p> <p>Influenza, Avian (human) </p> <p>Influenza H1N1 </p> <p>Plague </p> <p>Rabies </p> <p>Severe Acute Respiratory Syndrome (SARS) </p> <p>Smallpox (Variola) </p> <p>Tuberculosis (Pulmonary) </p> <p>Viral Hemorrhagic Fevers (e.g., Crimean-Congo, Ebola, Lassa, and Marburg viruses) </p> <p>Yellow Fever </p> <p>Occurrence of any unusual diseases specify </p> <p>..... </p>	<p>AFP/ Poliomyelitis 1</p> <p>Brucellosis 1</p> <p>Encephalitis, Specify Etiology: 1</p> <p> Viral</p> <p> Bacterial</p> <p>Escherichia coli: 1</p> <p>Haemophilus influenzae invasive disease 1</p> <p>Hepatitis A 1</p> <p>Hepatitis E 1</p> <p>Legionellosis 1</p> <p>Leprosy (Hansen Disease) 1</p> <p>Malaria 1</p> <p>Measles (Rubeola) 1</p> <p>Meningitis Specify Etiology: 1</p> <p> Viral</p> <p> Bacterial</p> <p>Pertussis (Whooping Cough) 1</p> <p>Relapsing Fever 1</p> <p>Rubella (German Measles) 1</p> <p>Rubella Syndrome, Congenital 1</p> <p>Shigellosis 1</p> <p>Typhoid /Paratyphoid Fever 1</p> <p>Typhus Fever 1</p>	<p>Amebiasis 7</p> <p>Chickenpox 7</p> <p>Giardiasis 7</p> <p>Hepatitis B (specify acute case or chronic) 7</p> <p>Hepatitis C (specify acute case or chronic) 7</p> <p>Hepatitis D (Delta) 7</p> <p>Influenza 7</p> <p>Invasive Pneumococcal Disease (IPD) 7</p> <p>Listeriosis 7</p> <p>Mumps 7</p> <p>Scabies 7</p> <p>Sexually Transmitted Infection (STIs) e.g. Chlamydia, Gonorrhea, Syphilis, other, 7</p> <p>specify.....</p> <p>Tetanus 7</p> <p>Tuberculosis (Extra-Pulmonary) 7</p>

