

034608480

SENATE BILL NO. 1303

Offered January 17, 2003

A BILL to amend and reenact §§ 32.1-35, 32.1-36, and 32.1-38 of the Code of Virginia, relating to reports of diseases to the Board of Health; sepsis and septicemia-related diseases.

Patron—Miller, Y.B.

Referred to Committee on Education and Health

Be it enacted by the General Assembly of Virginia:

1. That §§ 32.1-35, 32.1-36, and 32.1-38 of the Code of Virginia are amended and reenacted as follows:

§ 32.1-35. List and reports of diseases and dangerous microbes and pathogens.

A. The Board shall promulgate from time to time a list of diseases, including diseases caused by exposure to any toxic substance as defined in § 32.1-239 and including diseases that may be caused by exposure to an agent or substance that has the potential for use as a weapon, that shall be required to be reported. The Board shall also promulgate from time to time a list of dangerous microbes and pathogens that shall be required to be reported by laboratories. The Board may classify such diseases, microbes and pathogens and prescribe the manner and time of such reporting.

B. The Board's list of reportable diseases shall include severe sepsis and septicemia-related diseases. The Board may require the report to include information relating to the epidemiology, treatment, morbidity, and mortality of sepsis and septicemia-related diseases, and related syndromes, including but not limited to, multiple organ dysfunction syndrome.

§ 32.1-36. Reports by physicians and laboratory directors.

A. Every physician practicing in this Commonwealth who shall diagnose or reasonably suspect that any patient of his has any disease required by the Board to be reported, *including sepsis and septicemia-related diseases*, and every director of any laboratory doing business in this Commonwealth that performs any test whose results indicate the presence of any such disease, *including sepsis and septicemia-related diseases*, shall make a report within such time and in such manner as may be prescribed by regulations of the Board. Any such report involving a disease that such physician or laboratory director has reason to believe may be caused by exposure to an agent or substance that has been or may be used as a weapon shall be reported directly to the Commissioner or his designee using an emergency response system maintained by the Department and operated ~~twenty-four~~ 24 hours a day.

B. Any physician who diagnoses a venereal disease in a child ~~twelve~~ 12 years of age or under shall, in addition to the requirements of subsection A ~~hereof~~, report the matter, in accordance with the provisions of § 63.2-1509, unless the physician reasonably believes that the infection was acquired congenitally or by a means other than sexual abuse.

C. Any physician practicing in this Commonwealth shall report to the local health department the identity of any patient of his who has tested positive for exposure to human immunodeficiency virus as demonstrated by such test or tests as are approved by the Board for this purpose. However, there is no duty on the part of the physician to notify any third party other than the local health department of such test result, and a cause of action shall not arise from any failure to notify any other third party.

D. Upon investigation by the local health department of a patient reported pursuant to subsection A, the Commissioner may, to the extent permitted by law, disclose the patient's identity and disease to the patient's employer if the Commissioner determines that (i) the patient's employment responsibilities require contact with the public and (ii) the nature of the patient's disease and nature of contact with the public constitutes a threat to the public health.

The patient's identity and disease state shall be confidential as provided in §§ 32.1-36.1 and 32.1-41. Any unauthorized disclosure of reports made pursuant to this section shall be subject to the penalties of § 32.1-27.

E. Physicians and laboratory directors may voluntarily report additional information at the request of the Department of Health for special surveillance or other epidemiological studies, *including studies of the incidence, severity, treatment, morbidity, and mortality of sepsis and septicemia-related diseases*.

F. ~~4.~~ Every laboratory located in this Commonwealth shall file a written report with the Department of its inventory of dangerous microbes and pathogens on an annual basis. The laboratory shall supplement this report upon any change in such inventory as prescribed by the Board or immediately if any microbes or pathogens cannot be accounted for within ~~twenty-four~~ 24 hours.

~~2.~~ Except as provided in this subsection, a report submitted pursuant to this subsection shall be confidential and shall not be a public record pursuant to the Freedom of Information Act (§ 2.2-3700 et

INTRODUCED

SB1303

59 seq.). The Department shall cooperate with and may share information submitted to it pursuant to this
60 subsection with the United States Centers for Disease Control and Prevention, and state and federal
61 law-enforcement agencies in any investigation involving the release, theft or loss of a dangerous microbe
62 or pathogen required to be reported under this subsection.

63 3-. Any unauthorized disclosure of reports made pursuant to this subsection shall be subject to the
64 penalties of § 32.1-27.

65 § 32.1-38. Immunity from liability.

66 Any person making a report or disclosure required or authorized by this chapter, including any
67 voluntary reports submitted at the request of the Department of Health for special surveillance or other
68 epidemiological studies, *including epidemiological studies of sepsis and septicemia-related diseases*, shall
69 be immune from civil liability or criminal penalty connected therewith unless such person acted with
70 gross negligence or malicious intent.

71 Further, except for such reporting requirements as may be established in this chapter or by any
72 regulation promulgated pursuant thereto, there shall be no duty on the part of any blood collection
73 agency or tissue bank to notify any other person of any reported test results, and a cause of action shall
74 not arise from any failure by such entities to notify others.

75 Neither the Commissioner nor any local health director shall disclose to the public the name of any
76 person reported or the name of any person making a report pursuant to this chapter.

77 No person making a report required or authorized by this chapter shall be responsible for recognizing
78 agents or suspecting the presence of any conditions, *including septicemia*, beyond the competence of a
79 reasonable person practicing his profession; however, any such person shall be immune as provided in
80 this section when making reports in good faith without gross negligence and within the usual scope of
81 his practice.