

Administrative Rules of Montana (ARM): Interpretation of Immediate Reporting

Q: <u>ARM 37.114.201</u> states that anyone who knows that a case exists of a reportable condition defined in <u>ARM 37.114.203</u> must 'immediately' report to the local health officer the information specified in <u>37.114.205</u>(1) and (2). **What exactly does 'immediately reportable' mean?**

A: Some reportable conditions may require more immediate public health follow up and coordination than others, and a call to report the case should be made to local/tribal public health immediately. Public health partners in Montana are available to respond to matters of public health urgency or emergency on a 24/7 basis. Examples of events that may require 24/7 support include, but are not limited to, coordination of antitoxin administration and specimen collection for a suspect botulism case, coordination of animal rabies testing after a human exposure to a bat, suspect measles guidance such as specimen collection and transport protocols and case isolation, or infection control guidance during an influenza outbreak at a healthcare facility.

Many cases of reportable conditions meet the requirement for immediate reporting when they are automatically notified to local or tribal public health through electronic laboratory reporting into MIDIS, when this process of notification is approved by the local health officer. Cases that do not need urgent public health follow up may meet the criteria for immediate reporting when they are notified in this way.

Regular communication between key surveillance partners and local/tribal public health is important to build relationships and set expectations for reporting. If there seems to be confusion regarding which cases require a phone call in the middle of the night or on weekends and which do not, a conversation between the provider and local/tribal public health may be best.