
By: **Chairman, Health and Government Operations Committee (By Request
- Departmental - Health and Mental Hygiene)**

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Assigned to: Health and Government Operations

Committee Report: Favorable with amendments
House action: Adopted
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CHAPTER _____

1 AN ACT concerning

2 **Disease Prevention - Laboratory Examination Reports**

3 FOR the purpose of clarifying the requirement for the director of a medical laboratory
4 in the State to submit a report to a certain local health officer on certain
5 diseases or conditions; requiring the director of an out-of-state medical
6 laboratory to submit a report to the Secretary of Health and Mental Hygiene on
7 certain diseases or conditions under certain circumstances; requiring the
8 Secretary to inform a certain local health officer about a certain report from an
9 out-of-state medical laboratory; adding certain diseases to the list of diseases
10 and conditions required to be reported; requiring certain medical laboratories to
11 make a certain request under certain circumstances; requiring certain medical
12 laboratories to inform the Department of Health and Mental Hygiene of certain
13 information under certain circumstances; requiring certain medical laboratories
14 to provide certain medical laboratories, offices, or facilities with a certain form;
15 and generally relating to laboratory reporting of certain diseases and conditions.

16 BY repealing and reenacting, with amendments,
17 Article - Health - General
18 Section 18-205
19 Annotated Code of Maryland
20 (2000 Replacement Volume and 2003 Supplement)

21 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
22 MARYLAND, That the Laws of Maryland read as follows:

1

Article - Health - General

2 18-205.

3 (a) In this section, "invasive disease" means a disease in which an organism is
4 detected in a specimen taken from a normally sterile body site.

5 (b) (1) The director of a medical laboratory LOCATED IN THIS STATE shall
6 submit a report to the health officer for the county where the laboratory is located
7 within 48 hours after an examination of a HUMAN specimen [from a human body]
8 shows evidence of any [of the following:] DISEASE OR CONDITION LISTED IN
9 SUBSECTION (C) OF THIS SECTION.

10 (2) THE DIRECTOR OF A MEDICAL LABORATORY LOCATED OUTSIDE OF
11 THIS STATE THAT PERFORMS A MEDICAL LABORATORY TEST ON A HUMAN SPECIMEN
12 ACQUIRED FROM A PERSON IN THIS STATE SHALL SUBMIT A REPORT TO THE
13 SECRETARY WITHIN 48 HOURS AFTER AN EXAMINATION OF THAT SPECIMEN SHOWS
14 EVIDENCE OF ANY DISEASE OR CONDITION LISTED IN SUBSECTION (C) OF THIS
15 SECTION.

16 (C) THE DISEASES OR CONDITIONS REPORTABLE BY A MEDICAL LABORATORY
17 DIRECTOR UNDER THIS SECTION ARE:

- 18 (1) Amoebiasis.
- 19 (2) Anthrax.
- 20 (3) ARBOVIRUS INFECTION (ALL TYPES).
- 21 [(3)] (4) Bacteremia in newborns.
- 22 [(4)] (5) Botulism.
- 23 [(5)] (6) Brucellosis.
- 24 [(6)] (7) Campylobacter infection.
- 25 [(7)] (8) CD 4+ count, if less than 200/MM3.
- 26 [(8)] (9) Chlamydia infection.
- 27 [(9)] (10) Cholera.
- 28 [(10)] (11) Coccidioidomycosis.
- 29 [(11)] (12) Cryptosporidiosis.
- 30 [(12)] (13) Cyclosporiasis.
- 31 [(13)] (14) Dengue fever.

1	[(14)]	(15)	Diphtheria.
2	[(15)]	(16)	Ehrlichiosis.
3	[(16)]	(17)	Encephalitis, infectious.
4	[(17)]	(18)	E. Coli 0157:H7 infection.
5	[(18)]	(19)	Giardiasis.
6	[(19)]	(20)	Gonorrhea.
7	[(20)]	(21)	Haemophilus influenzae, invasive disease.
8	[(21)]	(22)	Hansen disease (leprosy).
9	[(22)]	(23)	Hantavirus infection.
10	[(23)]	(24)	Hepatitis, viral, types A, B, C, and other types.
11	[(24)]	(25)	Human immunodeficiency virus infection.
12	[(25)]	(26)	Isosporiasis.
13	[(26)]	(27)	Legionellosis.
14	[(27)]	(28)	Leptospirosis.
15	[(28)]	(29)	Listeriosis.
16	[(29)]	(30)	Lyme disease.
17	[(30)]	(31)	Malaria.
18	[(31)]	(32)	Measles.
19	[(32)]	(33)	Meningococcal invasive disease.
20	[(33)]	(34)	Meningitis, infectious.
21	[(34)]	(35)	Microsporidiosis.
22	[(35)]	(36)	Mumps.
23	[(36)]	(37)	Pertussis.
24	(38)		PESTICIDE RELATED ILLNESS.
25	[(37)]	(39)	Plague.
26	[(38)]	(40)	Poliomyelitis.

1	[(39)]	(41)	Psittacosis.
2	[(40)]	(42)	Q fever.
3	[(41)]	(43)	Rabies.
4	[(42)]	(44)	Ricin toxin.
5	[(43)]	(45)	Rocky Mountain spotted fever.
6	[(44)]	(46)	Rubella and congenital rubella syndrome.
7	[(45)]	(47)	Salmonellosis (nontyphoid fever types).
8	(48)		SEVERE ACUTE RESPIRATORY SYNDROME.
9	[(46)]	(49)	Shiga-like toxin production.
10	[(47)]	(50)	Shigellosis.
11	[(48)]	(51)	Smallpox and other orthopox viruses.
12	[(49)]	(52)	Staphylococcal enterotoxin.
13	[(50)]	(53)	Streptococcal invasive disease, group A.
14	[(51)]	(54)	Streptococcal invasive disease, group B.
15	[(52)]	(55)	Streptococcus pneumoniae, invasive disease.
16	[(53)]	(56)	Syphilis.
17	[(54)]	(57)	Trichinosis.
18	[(55)]	(58)	Tuberculosis.
19	[(56)]	(59)	Tularemia.
20	[(57)]	(60)	Typhoid fever.
21	[(58)]	(61)	Varicella (chickenpox), fatal cases only.
22	[(59)]	(62)	Vibriosis, noncholera.
23	[(60)]	(63)	Viral hemorrhagic fevers (all types).
24	[(61)]	(64)	Yellow fever.
25	[(62)]	(65)	Yersiniosis.

1 [(c)] (D) (1) When more than 1 specimen is taken from a patient during 1
 2 disease episode, the director of the medical laboratory need not report every test
 3 result of a specimen that shows evidence of the same disease in that patient if:

4 (i) At least 1 positive test result is reported; and

5 (ii) The health officer has approved the reporting of less than all
 6 test results.

7 (2) The director of the medical laboratory need not report vibriosis,
 8 noncholera, under subsection [(b)(59)] (C)(62) of this section if the disease is found in
 9 a specimen obtained from the patient's teeth, gingival tissues, or oral mucosa.

10 [(d)] (E) (1) The report shall:

11 (+) (I) Be either in the form that the Department prescribes or on the
 12 form that the Department provides; and

13 (2) (II) ~~State~~ SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, STATE
 14 AT A MINIMUM:

15 (i) 1. The date, type, and result of the test that shows evidence
 16 of a disease required to be reported;

17 (ii) ~~1.~~ 2. A. Except as provided in item ~~2~~ B of this item, the
 18 name, age, sex, and residence address of the patient from whom the specimen was
 19 taken; and

20 ~~2.~~ B. For reports of human immunodeficiency virus
 21 infection and CD 4+ count under 200/MM3, the unique patient identifying number,
 22 age, sex, and zip code of residence of the patient; and

23 (iii) 3. The name and address of the physician who requested the
 24 test.

25 (2) (I) IF A MEDICAL LABORATORY REQUIRED TO MAKE A REPORT
 26 UNDER THIS SECTION RECEIVES A HUMAN SPECIMEN WITHOUT THE INFORMATION
 27 REQUIRED UNDER PARAGRAPH (1)(II) OF THIS SUBSECTION, THE MEDICAL
 28 LABORATORY SHALL MAKE A WRITTEN REQUEST TO THE MEDICAL LABORATORY,
 29 OFFICE, OR FACILITY IN WHICH THE HUMAN SPECIMEN WAS TAKEN INITIALLY FOR
 30 THE INFORMATION REQUIRED UNDER PARAGRAPH (1)(II) OF THIS SUBSECTION.

31 (II) IF THE MEDICAL LABORATORY, OFFICE, OR FACILITY DOES NOT
 32 PROVIDE THE INFORMATION REQUESTED UNDER SUBPARAGRAPH (I) OF THIS
 33 PARAGRAPH, THE MEDICAL LABORATORY THAT PERFORMS THE TESTING SHALL
 34 INFORM THE DEPARTMENT OF THE FAILURE OF THE MEDICAL LABORATORY,
 35 OFFICE, OR FACILITY TO PROVIDE THE INFORMATION REQUIRED UNDER
 36 PARAGRAPH (1)(II) OF THIS SUBSECTION.

1 (III) A MEDICAL LABORATORY THAT FILES REPORTS UNDER THIS
2 SECTION SHALL PROVIDE MEDICAL LABORATORIES, OFFICES, OR FACILITIES THAT
3 TAKE HUMAN SPECIMENS WITH REFERRAL FORMS THAT REQUEST THE
4 INFORMATION REQUIRED BY THIS SECTION.

5 [(e)] (F) This section does not relieve an attending physician of the duty to
6 report under § 18-201 of this subtitle.

7 [(f)] (G) (1) A health officer shall inform the Secretary of each laboratory
8 examination report received under SUBSECTION (B)(1) OF this section.

9 (2) THE SECRETARY SHALL INFORM THE HEALTH OFFICER OF THE
10 JURISDICTION WHERE THE PATIENT RESIDES OF A LABORATORY EXAMINATION
11 REPORT RECEIVED UNDER THIS SECTION FROM A MEDICAL LABORATORY LOCATED
12 OUTSIDE THIS STATE.

13 [(g)] (H) The Secretary, a health officer, or an agent of the Secretary or health
14 officer may discuss a laboratory report with the attending physician, but, if the
15 physician is reasonably available, may communicate with a patient only with the
16 consent of the attending physician.

17 [(h)] (I) (1) All laboratory reports required under this section are:

18 (i) Confidential;

19 (ii) Not open to public inspection; and

20 (iii) Subject to subpoena or discovery in a criminal or civil
21 proceeding only pursuant to a court order sealing the court record.

22 (2) This subsection does not apply to a disclosure by the Secretary to
23 another governmental agency performing its lawful duties as authorized by an act of
24 the Maryland General Assembly or the United States Congress where the Secretary
25 determines that:

26 (i) The agency to whom the information is disclosed will maintain
27 the confidentiality of the disclosure; and

28 (ii) The disclosure is necessary to protect the public health or to
29 prevent the spread of an infectious or contagious disease.

30 [(i)] (J) To assure compliance with this section, the Secretary, a health
31 officer, or an agent of the Secretary or health officer may inspect pertinent laboratory
32 records.

33 [(j)] (K) (1) Except as provided in paragraph (2) of this subsection, a
34 director of a medical laboratory, the Secretary, a health officer, or an agent of the
35 director, Secretary, or health officer may compile or distribute a reproducible list of
36 any of the names of patients that are in reports required under this section.

1 (2) A director of a medical laboratory, the Secretary, a health officer, or
2 an agent of the director, Secretary, or health officer may not compile or distribute a
3 reproducible list of any of the names of patients in reports relating to human
4 immunodeficiency virus infection or CD 4+ count, if less than 200/MM3.

5 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take
6 effect October 1, 2004.