STATUTORY INSTRUMENT

S.I. No. 707 of 2003

INFECTIOUS DISEASES (AMENDMENT) (NO. 3) REGULATIONS 2003

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I, Micheál Martin, Minister for Health and Children, in exercise of the powers conferred on me by sections 5 and 29 of the Health Act 1947 (No. 28 of 1947) and by section 31 of the said Act, as amended by section 34 of the Health Act 1953 (No. 26 of 1953), hereby make the following regulations:

PART 1 – PRELIMINARY AND GENERAL

1. These Regulations may be cited as the Infectious Diseases (Amendment) (No. 3) Regulations 2003.

2. The Regulations shall come into operation on 1 January 2004.

3. In these Regulations -


PART 2 - AMENDMENTS TO THE PRINCIPAL REGULATIONS

4. (1) The Schedule to the Principal Regulations as amended by the Infectious Diseases (Amendment) Regulations 1985 (S.I. No. 268 of 1985), the Infectious Diseases (Amendment) Regulations 1988 (S.I. No. 288 of 1988), the Infectious Diseases (Amendment) Regulations 1996 (S.I. No. 384 of 1996) and the Infectious Diseases (Amendment) Regulations 2003 (S.I. No. 115 of 2003) is amended by substituting the Schedule detailed hereunder for the existing Schedule:

   (2) Regulation 2 of the Principal Regulations is amended as follows by:

   (i) the insertion after ““the Minister” means the Minister for Health” of the following:

   “case definition” means the set of clinical or microbiological characteristics by which a case of infectious disease is defined, which shall be maintained, updated and circulated by the National Disease Surveillance Centre;

   “clinical director of a diagnostic laboratory” means (a) a consultant
clinical microbiologist, consultant pathologist or other medical practitioner in charge or control of, or providing medical supervision in, a laboratory, or (b) other laboratory medical or scientific staff to whom the function of providing notification of infectious diseases has been delegated by the clinical director;

“laboratory” means an institution, or facility within an institution, equipped with apparatus and reagents for the performance of diagnostic tests for human infections

“unusual cluster or changing pattern of illness” means an aggregation of health events, grouped together in time or space, that is believed or perceived to be greater than could be expected by chance”

(ii) by the substitution of the definition of the “National Disease Surveillance Centre” by the following:

“National Disease Surveillance Centre” means the centre of this name with an address at 25 – 27 Middle Gardiner Street, Dublin 1”.

(3) Regulation 6 of the Principal Regulations is amended by substituting the following for the existing regulation:

“The diseases and their respective causative pathogens listed in the Schedule to these Regulations are specified to be infectious diseases and the expression “infectious disease” shall be construed as meaning any disease or causative pathogen so listed.”

(4) Regulation 8 of the Principal Regulations is amended by substituting the following for the existing regulation:

“All the infectious diseases listed in the Schedule to these Regulations, except acute anterior poliomyelitis, cholera, diphtheria, paratyphoid, plague, severe acute respiratory syndrome (SARS), smallpox, tuberculosis, typhoid, typhus and viral hemorrhagic fevers (Lassa, Marburg, Ebola, Crimean-Congo) shall be excluded from the application of Section 38 of the Health Act 1947 as amended by Section 35 of the Health Act 1953.”

(5) Regulation 9 of the Principal Regulations is amended by substituting the following for the existing regulation:

“All the infectious diseases listed in the Schedule to these Regulations except acute anterior poliomyelitis, diphtheria, paratyphoid, salmonellosis, shigellosis, tuberculosis, typhoid, typhus and viral hemorrhagic fevers (Lassa, Marburg, Ebola, Crimean-Congo) shall be excluded from the application of Section 44 of the Health Act 1947 as amended by Section 36 of the Health Act 1953.”

(6)(i) Regulation 14(1) of the Principal Regulations is amended by substituting
“(1) Subject to the provisions of Regulation 15 of these Regulations, a medical practitioner, as soon as he or she becomes aware or suspects that a person on whom he or she is in professional attendance is suffering from or is the carrier of an infectious disease, and a clinical director of a diagnostic laboratory as soon as an infectious disease is identified in that laboratory, shall –

(a) forthwith transmit a written or electronic notification to a medical officer of health, and

(b) further in the case of acute anterior poliomyelitis, anthrax, botulism, cholera, diphtheria, enterohaemorrhagic escherichia coli, haemophilus influenzae disease, legionellosis, meningococcal disease, paratyphoid, plague, rabies, severe acute respiratory syndrome (SARS), smallpox, tularemia, typhoid, typhus, viral haemorrhagic fevers (Lassa, Marburg, Ebola, Crimean-Congo), or yellow fever or where he or she is of the opinion that there is a serious outbreak of infectious disease in a locality, give immediate preliminary notification thereof to a medical officer of health.”

(6)(ii) Regulation 14 of the Principal Regulations, as amended by the Infectious Diseases (Amendment) Regulations 1996 (S.I. No. 384 of 1996), is further amended by inserting after paragraph (2)(b) the following:

“(3)(a) A medical practitioner and a clinical director of a diagnostic laboratory shall have regard to the case definitions for infectious diseases circulated by the National Disease Surveillance Centre.

(b) A medical practitioner and a clinical director of a diagnostic laboratory shall notify to the medical officer of health any unusual clusters or changing patterns of any illness, and individual cases thereof, that may be of public health concern. The medical officer of health shall in turn notify the National Disease Surveillance Centre.”

(7) Regulation 15(2) of the Principal Regulations is amended by substituting the following for the existing paragraph:

“(2)(a) Where a medical practitioner who is a medical officer of an infectious disease hospital or infectious disease unit is required under sub-regulation (1) of this regulation to notify a case of acute anterior poliomyelitis, anthrax, botulism, cholera, diphtheria, enterohaemorrhagic escherichia coli, haemophilus influenzae disease, legionellosis, meningococcal disease, paratyphoid, plague, rabies, severe acute respiratory syndrome (SARS), smallpox, tularemia, typhoid, typhus, viral haemorrhagic fevers (Lassa, Marburg, Ebola, Crimean-Congo) or yellow fever, or where he or
she is of the opinion that there is a serious outbreak of infectious disease in a locality he or she shall give immediate preliminary notification thereof to a medical officer of health.

(b) A medical practitioner and a clinical director of a diagnostic laboratory shall notify to the medical officer of health any unusual clusters or changing patterns of any illness, and individual cases thereof, within the infectious disease hospital or infectious disease unit, that may be of public health concern. The medical officer of health shall in turn notify the National Disease Surveillance Centre.”

(8) Regulation 16 of the Principal Regulations is amended by substituting the following for the existing regulation:

“A registrar of births and deaths shall send to a medical officer of health such returns of deaths from infectious diseases as may be specified by the Minister. Every medical officer of health shall in turn forward such returns to the National Disease Surveillance Centre.”

(9) Regulation 18 of the Principal Regulations is amended by substituting the following for the existing paragraphs:

“(1) A medical officer of health shall furnish to the Director of the National Disease Surveillance Centre by the Wednesday of each week a return of the cases of infectious diseases notified to him or her in the week ending on the previous Saturday. This return may be provided electronically.

(2) A medical officer of health shall furnish to the Minister, or to the Director of the National Disease Surveillance Centre, as soon as possible a detailed report on each case of such infectious disease as the Minister or the Director of the National Disease Surveillance Centre may specify from time to time.

(3) A standard form for the purpose of returning infectious disease shall be compiled by the National Disease Surveillance Centre and circulated by that Centre.”
# SCHEDULE

**Diseases and their respective causative pathogens specified to be Infectious Diseases**

<table>
<thead>
<tr>
<th>Disease</th>
<th>Causative Pathogen</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute anterior poliomyelitis</td>
<td>Polio virus</td>
</tr>
<tr>
<td>Acute infectious gastroenteritis</td>
<td></td>
</tr>
<tr>
<td>Ano-genital warts</td>
<td></td>
</tr>
<tr>
<td>Anthrax</td>
<td>Bacillus anthracis</td>
</tr>
<tr>
<td>Bacillus cereus food-borne infection/intoxication</td>
<td>Bacillus cereus</td>
</tr>
<tr>
<td>Bacterial meningitis (not otherwise specified)</td>
<td></td>
</tr>
<tr>
<td>Botulism</td>
<td>Clostridium botulinum</td>
</tr>
<tr>
<td>Brucellosis</td>
<td>Brucella species</td>
</tr>
<tr>
<td>Campylobacter infection</td>
<td>Campylobacter species</td>
</tr>
<tr>
<td>Chancrecid</td>
<td>Haemophilus ducreyi</td>
</tr>
<tr>
<td>Chlamydia trachomatis infection (genital)</td>
<td>Chlamydia trachomatis</td>
</tr>
<tr>
<td>Cholera</td>
<td>Vibrio cholera</td>
</tr>
<tr>
<td>Clostridium perfringens (type A) food-borne disease</td>
<td>Clostridium perfringens</td>
</tr>
<tr>
<td>Creutzfeldt Jakob disease</td>
<td></td>
</tr>
<tr>
<td>nv Creutzfeldt Jakob disease</td>
<td></td>
</tr>
<tr>
<td>Cryptosporidiosis</td>
<td>Cryptosporidium parvum</td>
</tr>
<tr>
<td>Diphtheria</td>
<td>Corynebacterium diphtheriae</td>
</tr>
<tr>
<td>Echinococcosis</td>
<td>Echinococcus species</td>
</tr>
<tr>
<td>Enterococcal bacteraemia</td>
<td>Enterococcus species (blood)</td>
</tr>
<tr>
<td>Enterohaemorrhagic Escherichia coli</td>
<td>Escherichia coli of serogroup known to be toxin-producing</td>
</tr>
<tr>
<td>Escherichia coli infection (invasive)</td>
<td>Escherichia coli (blood, CSF)</td>
</tr>
<tr>
<td>Giardiasis</td>
<td>Giardia lamblia</td>
</tr>
<tr>
<td>Gonorrhoea</td>
<td>Neisseria gonorrhoeae</td>
</tr>
<tr>
<td>Granuloma inguinale</td>
<td></td>
</tr>
<tr>
<td>Haemophilus influenzae disease (invasive)</td>
<td>Haemophilus influenzae (blood, CSF or other normally sterile site)</td>
</tr>
<tr>
<td>Hepatitis A (acute)</td>
<td>Hepatitis A virus</td>
</tr>
<tr>
<td>Hepatitis B (acute and chronic)</td>
<td>Hepatitis B virus</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>Hepatitis C virus</td>
</tr>
<tr>
<td>Herpes simplex (genital)</td>
<td>Herpes simplex virus</td>
</tr>
<tr>
<td>Influenza</td>
<td>Influenza A and B virus</td>
</tr>
<tr>
<td>Legionellosis</td>
<td>Legionella species</td>
</tr>
<tr>
<td>Leptospirosis</td>
<td>Leptospira species</td>
</tr>
<tr>
<td>Listeriosis</td>
<td>Listeria monocytogenes</td>
</tr>
<tr>
<td>Lymphogranuloma venereum</td>
<td></td>
</tr>
<tr>
<td>Malaria</td>
<td>Plasmodium falciparum, vivax, ovale, malariae</td>
</tr>
<tr>
<td>Measles</td>
<td>Measles virus</td>
</tr>
<tr>
<td>Meningococcal disease</td>
<td>Neisseria meningitidis</td>
</tr>
<tr>
<td>Mumps</td>
<td>Mumps virus</td>
</tr>
<tr>
<td>Non-specific urethritis</td>
<td></td>
</tr>
</tbody>
</table>
Noroviral infection  
Paratyphoid  
Pertussis  
Plague  
Q Fever  
Rabies  
Rubella  
Salmonellosis  
Severe Acute Respiratory Syndrome (SARS)  
Shigellosis  
Smallpox  
Staphylococcal food poisoning  

Staphylococcus aureus bacteraemia  
Streptococcus group A infection (invasive)  
Streptococcus pneumoniae infection (invasive)  

Syphilis  
Tetanus  
Toxoplasmosis  
Trichinosis  
Trichomoniasis  
Tuberculosis  

Tularemia  
Typhoid  
Typhus  
Viral encephalitis  
Viral meningitis  
Viral haemorrhagic fevers  

Yellow Fever  
Yersiniosis  

Norovirus  
Salmonella paratyphi  
Bordetella pertussis  
Yersinia pestis  
Coxiella burnetii  
Rabies virus  
Rubella virus  
Salmonella enterica  
SARS-associated coronavirus  
Shigella species  
Variola virus  
Enterotoxigenic Staphylococcus aureus  
Staphylococcus aureus (blood)  
Streptococcus pyogenes (blood, CSF or other normally sterile site)  
Streptococcus pneumoniae (blood, CSF or other normally sterile site)  
Treponema pallidum  
Clostridium tetani  
Toxoplasma gondii  
Trichinella species  
Trichomonas vaginalis  
Mycobacterium tuberculosis complex  
Francisella tularensis  
Salmonella typhi  
Rickettsia prowazekii  

Lassa virus, Marburg virus, Ebola virus, Crimean-Congo haemorrhagic fever virus  
Yellow Fever virus  
Yersinia enterocolitica, Yersinia pseudotuberculosis  

Given under my Official Seal  
18 December 2003  

MICHEÁL MARTIN  
Minister for Health and Children
Explanatory Note

(This note is not part of the Instrument and does not purport to be a legal interpretation.)

The Schedule of Infectious Diseases is replaced. In addition to medical practitioners, the clinical directors of diagnostic laboratories are now required to report infectious diseases. The list of infectious diseases for immediate preliminary notification has been updated. Unusual clusters or changing pattern of illness that may be of public health concern must also be reported. The Regulations advise that the National Disease Surveillance Centre is responsible for the maintenance, updating and circulation of case definitions in relation to infectious diseases as well as the standard form for returning infectious disease. The Regulations update the address of the National Disease Surveillance Centre.

Copies may be obtained from the Government Publications Office, Sun Alliance House, Molesworth Street, Dublin 2, or by mail order from Government Publications, Postal Trade Section, 5 St Stephen’s Green, Dublin 2. Fax: 01 647 6843.

DEPARTMENT OF HEALTH AND CHILDREN
DECEMBER 2003