

LCB File No. R047-99

PROPOSED REGULATION OF THE HEALTH DIVISION

**Amendments to NAC 441A
Approved by the State Board of Health**

441A.035 "Case" defined. Except as otherwise described in the provisions of this chapter that are applicable to a particular communicable disease, "case" has the meaning ascribed to it in "Case Definitions for *Infectious Conditions Under* Public Health Surveillance," published by the Department of Health and Human Services.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.040 "Communicable disease" defined. "Communicable disease" includes:

1. Acquired immune deficiency syndrome (AIDS).
2. Amebiasis.
3. Animal bite from a rabies-susceptible species.
4. Anthrax.
5. Botulism, foodborne.
6. Botulism, infant.
7. Botulism, wound.
8. Botulism, other.
9. Brucellosis.
10. Campylobacteriosis.
11. Chancroid.
12. Chlamydia trachomatis infection of the genital tract.
13. Cholera.
14. Coccidioidomycosis.

15. Cryptosporidiosis.
16. Diphtheria.
17. E. coli 0157:H7.
18. Encephalitis.
19. Extraordinary occurrence of illness.
20. Foodborne disease outbreak.
21. Giardiasis.
22. Gonococcal infection.
23. Granuloma inguinale.
24. Haemophilus influenzae type b invasive disease.
25. Hansen's disease (leprosy).
26. Hantavirus.
27. Hemolytic-uremic syndrome (HUS).
28. Hepatitis A.
29. Hepatitis B.
30. Hepatitis C.
31. Hepatitis delta.
32. Hepatitis, unspecified.
33. Human immunodeficiency virus infection (HIV).
34. Influenza.
35. Legionellosis.
36. Leptospirosis.
37. Listeriosis.

38. Lyme disease.
39. Lymphogranuloma venereum.
40. Malaria.
41. Measles (rubeola).
42. Meningitis.
43. Meningococcal disease.
44. Mumps.
45. Pertussis.
46. Plague.
47. Poliomyelitis.
48. Psittacosis.
49. Q fever.
50. Rabies, human or animal.
51. Relapsing fever.
52. Respiratory syncytial virus infection.
53. Rocky Mountain spotted fever.
54. Rotavirus infection.
55. Rubella (including congenital rubella syndrome).
56. Salmonellosis.
57. Severe reaction to immunization.
58. Shigellosis.
59. Syphilis (including congenital syphilis).
60. Tetanus.

61. Toxic shock syndrome.
62. Trichinosis.
63. Tuberculosis.
64. Tularemia.
65. Typhoid fever.
66. Yersiniosis.

(Added to NAC by Bd. of Health, eff. 1-24-92; A 3-28-96)

441A. 117 “Insurer” defined. “Insurer” has the meaning ascribed to it in NRS 679A.100 but is limited to life insurance companies for purposes of this chapter.

REPORTING REQUIREMENTS

441A.225 Reporting of case, suspected case, carrier, animal rabies, or animal bite by a rabies-susceptible animal: General requirements.

1. Except as otherwise provided in this section, a report of a case, suspected case, or carrier, which is required to be made pursuant to the provisions of this chapter, must be made to the health authority:

(a) Within 24 hours after identifying the case, suspected case, or carrier; or

(b) During the regular business hours of the health authority on the first working day following the identification of the case, suspected case, or carrier.

2. Upon discovering a case having:

(a) An animal bite by a rabies-susceptible animal;

(b) Foodborne botulism;

(c) Extraordinary occurrence of illness;

(d) Meningococcal disease;

(e) Plague; or

(f) Rabies,

or that is part of a foodborne disease outbreak, the report must be made to the health authority within 24 hours after identifying the case, using the after-hours reporting system if the report is made at a time other than during the regular business hours of the health authority.

3. Upon discovering a suspected case considered possibly to have:

- (a) Foodborne botulism;
- (b) Extraordinary occurrence of illness;
- (c) Plague; or
- (d) Rabies,

or considered possibly to be part of a foodborne disease outbreak, the report must be made to the health authority within 24 hours after identifying the suspected case, using the after-hours reporting system if the report is made at a time other than during the regular business hours of the health authority.

4. A report to the health authority must be made by telephone, telecopy, electronic communication, or on an official report form furnished by the division.

5. A report of animal rabies or an animal bite by a rabies-susceptible animal must be made to the rabies control authority.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.230 Duty of health care provider to report case or suspected case; content of report.

1. A health care provider who knows of, or provides services to a case or suspected case shall report the case or suspected case to the health authority having jurisdiction where the office of the health care provider is located. The report must be made in the manner provided in NAC 441A.225.

2. The report must include:

- (a) The communicable disease or suspected communicable disease.
- (b) The name and the address or telephone number of the case or suspected case.
- (c) The name and the address or telephone number of the health care provider making the report.
- (d) The occupation, employer, age, sex, race, and date of birth of the case or suspected case, if available.

(e) The date of onset and the date of diagnosis of the communicable disease.

(f) Any other information requested by the health authority, if available.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.233 Duty of insurer to report findings of communicable disease; content of report.

1. An insurer that requires or requests any applicant or other person to be examined or tested with any medical, clinical or laboratory test or tests which yield evidence consistent with the presence of a communicable disease as defined in NAC 441A.040 subsections 1,28,29,30,33,59, and 63 shall report the results to the state health officer or his designee.

2. The report must include:

(a) The name and description of the examination or test performed.

(b) The communicable disease or suspected communicable disease.

(c) The date and result of the test or examination performed.

(d) The name and the address or telephone number of the insurer which required or requested the examination or test.

(e) The name, the age or date of birth and the address or telephone number of the person on whom the test or examination was performed.

(f) The name and the address or telephone number of the person who performed the examination or ordered the test.

(g) The name and the address or telephone number of the laboratory which performed the test.

(h) Any other information requested by the state health officer or his designee if available.

3. The report required in subsections 1 and 2 must be made to the state health officer or his designee by telephone, telecopy, or electronic communication within 10 working days of the time the insurer is notified of the results of the examination or test.

441A.235 Duty of director or other person in charge of medical laboratory to report findings of communicable disease; contents of report; submission of microbiologic cultures, subcultures, or other specimen or clinical material; reportable level of CD4 lymphocyte counts.

1. The director or other person in charge of a medical laboratory in which a test or examination of any specimen derived from the human body yields evidence suggesting the presence of any communicable disease shall:

(a) If the laboratory is in this state, report the findings to the health authority having jurisdiction where the office of the health care provider who ordered the test or examination is located.

(b) If the laboratory performed the test or examination on specimens obtained in this state or from residents of this state, and the laboratory is located outside of this state, report the findings to the state health officer.

The report must be made in the manner provided in NAC 441A.225.

2. The report must include:

(a) The date and result of the test or examination performed.

(b) The name and the age or date of birth of the person from whom the specimen was obtained.

(c) The name of the health care provider who ordered the test or examination.

(d) The name and the address or telephone number of the medical laboratory making the report.

3. The director or other person in charge of the medical laboratory shall also submit microbiologic cultures, subcultures, or other specimens or clinical material, if available, to the state hygienic laboratory in the division or other laboratory designated by the state health officer for diagnosis, confirmation, or further testing if so required by the state health officer pursuant to subsection 3 of NAC 441A.295.

4. A test or examination that is performed by a medical laboratory and reveals CD4 lymphocyte counts of less than 500 cells per microliter constitutes evidence suggesting the presence of a communicable disease and must be reported as required by this section.

(Added to NAC by Bd. of Health, eff. 1-24-92; A 11-1-95)

441A.240 Duty of director or other person in charge of medical facility to report communicable disease; report by infection control specialist; content of report.

1. The director or other person in charge of a medical facility who knows of or suspects the presence of a communicable disease within the medical facility shall report the communicable disease to the health authority having jurisdiction where the medical facility is located. Except as otherwise provided in subsection 2, the report must be made in the manner provided in NAC 441A.225.

2. If a medical facility has a designated infection control specialist, administrative procedures may be established by which all communicable diseases known or suspected within the facility, including its laboratories and outpatient locations, are reported to the health authority through the facility's infection control specialist or his representative. Notwithstanding any other provision of this chapter, a director or other person in charge of a laboratory in a medical facility or a health care provider in a medical facility is not required to report a known or suspected communicable disease in the facility that is reported to the health authority by the infection control specialist in accordance with the provisions of this section.

3. The report must include:

- (a) The communicable disease or suspected communicable disease.
- (b) The name and the address or telephone number of the case or suspected case.
- (c) The name, address, and telephone number of the medical facility making the report.
- (d) The occupation, employer, age, sex, race, and date of birth of the case or suspected case, if available.
- (e) The date of onset and the date of diagnosis of the disease.
- (f) Any other information requested by the health authority, if available.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.245 Duty of principal, director, or other person in charge of school, child care facility, or correctional facility to report communicable disease; content of report; cooperation with health authority.

1. The principal, director or other person in charge of a school, child care facility, or correctional facility who knows of or suspects the presence of a communicable disease within the school, child care facility, or correctional facility, shall report the communicable disease to the health authority having jurisdiction where the school, child care facility, or correctional facility is located. The report must be made in the manner provided in NAC 441A.225.

2. The report must include:

- (a) The communicable disease or suspected communicable disease.
- (b) The name and the address or telephone number of the person known or suspected to have the communicable disease.
- (c) The name, address, and telephone number of the person making the report.
- (d) The occupation, employer, age, sex, race, and date of birth of of the person known or suspected to have the communicable disease, if available.
- (e) The date of onset and the date of diagnosis of the communicable disease.
- (f) Any other information requested by the health authority, if available.

3. The principal, director, or other person in charge of a school, child care facility, or correctional facility, shall promptly cooperate with the health authority during:

(a) An investigation of the circumstances or cause of a case, suspected case, outbreak, or suspected outbreak.

(b) The carrying out of measures for the prevention, suppression, and control of a communicable disease, including procedures of exclusion, isolation, and quarantine.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.250 Duty of person in charge of blood bank to report findings of communicable disease; content of report.

1. A person in charge of a blood bank in which a test or examination of any specimen derived from the human body yields evidence suggesting the presence of a communicable disease shall report his findings to the health authority having jurisdiction where the blood bank is located. The report must be made in the manner provided in NAC 441A.225.

2. The report must include:

(a) The name, address, telephone number, and age of the person from whom the specimen was obtained.

(b) The date and location at which the specimen was obtained.

(c) The type of test or examination performed on the specimen.

(d) The date on which the test or examination was performed.

(e) The result of the test or examination.

(f) Any other information requested by the health authority, if available.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.255 Duty of person to report certain other persons he knows or suspects of having communicable disease; content of report.

1. Any person who reasonably suspects or knows that another person has a communicable disease and knows that the other person is not receiving health care services from a health care provider, shall report that person to the health authority having jurisdiction where the person making the report resides. The report must be made in the manner provided in NAC 441A.225.

2. The report must include:

(a) The communicable disease or suspected communicable disease.

(b) The name and the address or telephone number of the person known or suspected to have a communicable disease.

(c) The name, address, and telephone number of the person making the report.

(d) Any other information requested by the health authority, if available.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.290 Duties of district health officer who knows, suspects, or is informed of existence of communicable disease; preparation of case report; duty to inform persons of regulations relating to communicable diseases; authority to require reporting of infectious diseases.

1. A district health officer who knows, suspects, or is informed of the existence within his jurisdiction of a communicable disease shall:

(a) Use as a guideline for the investigation, prevention, suppression, and control of the communicable disease, the recommended guidelines for the investigation, prevention, suppression, and control of communicable disease:

(1) Of the Centers for Disease Control's Advisory Committee on Immunization Practices;

(2) Contained in "Control of Communicable Disease in Man," published by the American Public Health Association; and

(3) Contained in "The report of the Committee on Infectious Diseases of the American Academy of Pediatrics (Red Book)," published by the American Academy of Pediatrics; and

(b) Carry out the measures for the investigation, prevention, suppression, and control of the communicable disease specified in this chapter.

2. Upon receiving a report from a medical laboratory pursuant to NAC 441A.235, the district health officer shall contact the health care provider who ordered the test or examination and discuss the circumstances of the case or suspected case before initiating an investigation or contacting the case or suspected case. If, after a reasonable effort, the district health officer is unable to contact the health care provider who ordered the test or examination before the time when an investigation must be initiated in order to protect the public health, the district health

officer may proceed with the investigation, including contacting the case or suspected case, and may carry out measures for the prevention, suppression, and control of the communicable disease.

3. The district health officer shall notify the state health officer, or his representative, as soon as possible of any case reported in his jurisdiction:

(a) Having anthrax, foodborne botulism, cholera, diphtheria, extraordinary occurrence of illness, measles, plague, rabies, rubella, or typhoid fever.

(b) That is part of a foodborne disease outbreak.

4. The district health officer shall prepare a case report for each case reported in his jurisdiction pursuant to the provisions of this chapter. The report must be made on a form approved or provided by the division and must be submitted to the state health officer, or his representative, within 7 days of completing the investigation of the case. The district health officer shall provide all available information requested by the state health officer, or his representative, for each case reported *unless the provision of such information is prohibited by federal law*.

5. The district health officer shall inform persons within his jurisdiction who are subject to the provisions of this chapter of the requirements of this chapter.

6. The district health officer may require, in his jurisdiction, the reporting of an infectious disease not specified in NAC 441A.040 as a communicable disease.

(Added to NAC by Bd. of Health, eff. 1-24-92)

Animal Rabies

441A.410 Appointment of rabies control authority; ordinances providing for rabies control program; authority of county, city, or town to require licenses for dogs, cats, and ferrets.

1. Each county, city, and town shall appoint a rabies control authority and shall enact an ordinance providing for a rabies control program. The ordinance must include ~~the~~ provisions:

(a) Requiring all dogs, cats, and ferrets in its jurisdiction to be vaccinated against rabies as prescribed in subsection 1 of NAC 441A.435.

(b) Authorizing the rabies control authority in the county, city, or town to issue a citation to the owner of a dog, cat, or ferret which is not vaccinated against rabies as prescribed in subsection 1 of NAC 441A.435 and providing that only a certificate of vaccination against rabies issued pursuant to NAC 441A.440 is acceptable as proof of vaccination against rabies.

2. A county, city, or town may require an owner of a dog, cat, or ferret to obtain a license for each dog, cat, or ferret owned.

3. A county, city, or town shall provide the name, address, and telephone number of the rabies control authority appointed pursuant to subsection 1 to the state health officer or his designee

within 30 days of appointment.

4. A county, city, or town shall provide a copy of the ordinance enacted pursuant to subsection 1 to the state health officer or his designee within 30 days of enactment or amendment.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.415 Rabies control authority: Investigate report of person bitten by rabies-susceptible animal; ensure proper procedures carried out for confinement, testing, quarantine, or euthanasia of biting animal.

1. The rabies control authority shall investigate each report of a person bitten by a rabies-susceptible animal to confirm the report, to gather information about the circumstances of the biting incident, to determine the disposition of the biting animal, and to make recommendations for post-exposure rabies prophylaxis. If the rabies control authority is not the health authority, all recommendations for post-exposure prophylaxis shall be made in accordance with a protocol established by the health authority.
2. The rabies control authority shall ensure that the proper procedures are carried out for the confinement, testing, quarantine, or euthanasia of the biting animal as specified in NAC 441A.425. Lagomorphs (rabbits and hares) and rodents must be submitted for laboratory testing only under exceptional circumstances such as an unprovoked attack.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.420 Rabies control authority to investigate case or suspected case of animal rabies; authority of rabies control authority to enter private property; destruction of head of rabies-susceptible animal prohibited.

1. The rabies control authority shall investigate each report of a case having animal rabies or suspected case considered to have animal rabies to confirm the diagnosis, to identify the source of infection, to identify any human or animal contacts, to order the disposition of rabid or suspected rabid animals, and to make recommendations for post-exposure rabies prophylaxis.
2. Recommendations concerning post-exposure prophylaxis must be made in accordance with a protocol established by the health authority.
3. The rabies control authority may enter private property for the purpose of seizing an animal that has bitten a person, to determine if any animal kept or harbored therein has rabies or has been exposed to rabies, or to implement orders for quarantine, confinement, confiscation, or euthanasia of an animal.
4. Unless authorized by the rabies control authority, a person shall not destroy or allow to be destroyed the head of a rabies-susceptible animal which has bitten a person.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.425 Management of animals that have bitten persons; responsibility of owner for costs of quarantine, veterinary care, and examination.

1. Except as otherwise provided in subsections *2 through 4*, the rabies control authority shall cause a ~~dog or cat~~ *dog, cat or ferret*, regardless of current vaccination against rabies, which has bitten a person, to be quarantined and, for 10 days following the bite, to be observed under the supervision of a licensed veterinarian or other person designated by the rabies control authority. The ~~dog or cat~~ *dog, cat or ferret* must be quarantined within an enclosure or with restraints deemed adequate by the rabies control authority to prevent direct contact with a person or an animal.

2. If a dog which has bitten a person is owned by a canine unit of a law enforcement agency, the rabies control authority may waive the requirement that the dog be quarantined if:

(a) The bite occurred while the dog was carrying out his normal duties for the law enforcement agency;

(b) The dog has been vaccinated against rabies pursuant to NAC 441A.435; and

(c) For 10 days following the bite, the dog is observed under the supervision of a licensed veterinarian or other person designated by the rabies control authority.

3. If a dog which has bitten a person is trained and is being used as a service dog for the handicapped, the rabies control authority may waive the requirement that the dog be quarantined if:

(a) The bite occurred while the dog was carrying out his normal duties as a service dog for the handicapped;

(b) The dog has been vaccinated against rabies pursuant to NAC 441A.435; and

(c) For 10 days following the bite, the dog is observed under the supervision of a licensed veterinarian or other person designated by the rabies control authority.

4. A dog, cat or ferret which has bitten a person may be euthanized and tested for rabies without a period of quarantine if:

(a) The dog, cat or ferret is so ill or so severely injured that it would be inhumane to keep it alive; or

(b) The dog, cat or ferret is, in the opinion of the health authority or licensed veterinarian, exhibiting neurological signs, unexplained paralysis or behavioral signs or symptoms

consistent with rabies; or

(c) The dog, cat or ferret is too fractious or aggressive to be managed safely by the animal control authority.

5. ~~{3.}~~ The ~~{dog or cat}~~ *dog, cat or ferret* must be examined by a licensed veterinarian at the first sign of illness during the 10 days of observation. Any illness must be reported immediately to the rabies control authority. If signs of rabies develop during the 10 days of observation, the ~~{dog or cat}~~ *dog, cat or ferret* must be euthanized and its head removed and shipped under refrigeration (*not frozen*) for examination at the laboratory of the division of agriculture of the department of business and industry. If at the end of the quarantine period, the animal is free of all signs of rabies, the animal must be returned to its owner upon payment of all costs of quarantine and veterinary care and examination. *If at the end of the quarantine period, the animal is free of all signs of rabies, but the owner of the animal cannot be located after a reasonable effort as been made to do so, the animal may be euthanized in accordance with a protocol established by the animal control authority for the euthanasia of unwanted or stray animals without submission for laboratory examination.*

~~{4. If, after a reasonable effort is made to locate the owner of an unwanted or stray dog or cat, the owner is unknown or cannot be located, or if the owner agrees, the unwanted or stray dog or cat which has bitten a person may be euthanized and the head submitted for laboratory examination without a period of quarantine.}~~

6. ~~{5.}~~ A bat, raccoon, skunk, *or* fox ~~{, or unvaccinated ferret}~~ which has bitten a person must be euthanized immediately without a period of quarantine and the head submitted for laboratory examination.

7. ~~{6.}~~ ~~{A vaccinated ferret or}~~ *Any* other species of animal which has bitten a person must be managed as deemed appropriate in the discretion of the rabies control authority.

8. ~~{7.}~~ The owner of an animal quarantined pursuant to the provisions of this chapter is responsible for all costs of quarantine and veterinary care and examination.

9. ~~{8.}~~ The person responsible for supervising an animal quarantined pursuant to subsection 1 shall not release the animal to anyone other than the owner of the animal at the time it was quarantined or a member of the immediate family of that person.

(Added to NAC by Bd. of Health, eff. 1-24-92; A 3-28-96)

441A.430 Management of animals that have been in close contact with animal suspected or known to have rabies; responsibility of owner for costs of quarantine, veterinary care, and examination.

1. Except as otherwise provided in this section, a wild or exotic animal that is rabies-susceptible ~~{, including an unvaccinated ferret,}~~ in close contact with an animal suspected or

known to have rabies must be euthanized immediately. The rabies control authority may exempt a rare or valuable animal from the provisions of this section.

2. Unless the owner of the animal objects, a ~~{dog or cat}~~ *dog, cat or ferret* which has not been vaccinated pursuant to subsection 1 of NAC 441A.435 and which is considered by the rabies control authority to have been in close contact with an animal suspected or known to have rabies, must be euthanized immediately. If the owner of the animal objects, the ~~{dog or cat}~~ *dog, cat or ferret* must be ~~{immediately vaccinated against rabies and}~~ quarantined within an enclosure or with restraints deemed adequate by the rabies control authority to prevent direct contact with a person or an animal for a period of 180 days, under the supervision of a licensed veterinarian or other person designated by the rabies control authority. The ~~{dog or cat}~~ *dog, cat or ferret* must be vaccinated 1 month before release.

3. A dog, cat, or ferret which has been vaccinated pursuant to subsection 1 of NAC 441A.435 and which is considered by the rabies control authority to have been in close contact with an animal suspected or known to have rabies, must be:

(a) Immediately revaccinated and confined for ~~{90}~~ *45* days in a manner prescribed by the rabies control authority; or

(b) Upon the request of the owner of the dog, cat or ferret, euthanized.

4. A domesticated animal of a rabies-susceptible species, other than a dog, cat, or ferret, which is considered by the rabies control authority to have been in close contact with an animal suspected or known to have rabies, must be managed according to the discretion of the rabies control authority.

5. The owner of an animal confined pursuant to the provisions of this section is responsible for all costs of confinement and veterinary care and examination.

6. As used in this section, "in close contact with an animal suspected or known to have rabies" means, within the past 180 days, to have been bitten, mouthed or mauled by, or closely confined on the same premises with, an animal either suspected or known to have rabies.

(Added to NAC by Bd. of Health, eff. 1-24-92; A 3-28-96)

441A.433 Animal shelter required to provide for vaccination of dog, cat, or ferret released for adoption.

1. Before releasing a dog, cat, or ferret for adoption, an animal shelter shall:

(a) Have the dog, cat, or ferret vaccinated against rabies in the manner prescribed in NAC 441A.435 and provide the person who adopts the dog, cat, or ferret with a certificate of vaccination issued pursuant to NAC 441A.440; or

(b) Issue to the person who adopts the dog, cat, or ferret a voucher which can be presented to a licensed veterinarian as payment for the vaccination of the dog, cat, or ferret.

2. To defray the costs of complying with the requirements of subsection 1, an animal shelter may impose and collect a fee from each person who adopts a dog, cat, or ferret from the animal shelter. The fee must not exceed the administrative costs of complying with subsection 1, plus the actual cost of the vaccination.

3. As used in this section, "animal shelter" has the meaning ascribed to it in NRS 574.240.

(Added to NAC by Bd. of Health, eff. 3-28-96)

441A.435 Owner required to maintain dog, cat, or ferret currently vaccinated; exemption by licensed veterinarian; proof that cat or ferret currently vaccinated or exempted from vaccination required before entering state; impoundment; state veterinarian required to review revisions of recommendations for vaccination.

1. An owner of a dog, cat, or ferret shall maintain the dog, cat, or ferret currently vaccinated against rabies in accordance with the recommendations set forth in "The Compendium of Animal Rabies Control," a publication of the National Association of State Public Health Veterinarians, Inc., which is hereby adopted by reference. "The Compendium of Animal Rabies Control" is available, free of charge, from Virginia Department of Health, Office of Epidemiology, 109 Governor Street, Room 701, Richmond, Virginia 23219.

2. The vaccinations required in subsection 1 shall be carried out following the immunization protocol for triennial rabies vaccine as defined in the "Compendium of Animal Rabies Control" except for ferrets which shall be vaccinated annually. Protocols for longer duration vaccines may be followed when advised in the "Compendium of Animal Rabies Control."

3. ~~{2.}~~ A licensed veterinarian may exempt a dog, cat, or ferret from vaccination for health reasons. The veterinarian shall record the reasons for exemption and a specific description of the dog, cat, or ferret, including name, age, sex, breed, and color on a rabies vaccination certificate which must bear the owner's name and address. The veterinarian shall also record whether the reason for exemption is permanent, and if it is not, the date the exemption expires.

4. ~~{3.}~~ A dog, cat, or ferret exempted from or too young for vaccination against rabies must be confined to the premises of the owner or kept under physical restraint by the owner.

5. ~~{4.}~~ The owner shall not allow a *dog*, cat or ferret over 3 months of age to enter this state unless the owner has in his immediate possession written proof that the *dog*, cat or ferret is currently vaccinated against rabies or has an exemption for health reasons.

6. ~~{5.}~~ If the owner of a dog, cat, or ferret violates any provision of this section, the rabies control authority may impound the dog, cat or ferret.

7. ~~{6.}~~ The chief of the bureau of animal industry of the division of agriculture of the department of business and industry (state veterinarian) shall review any revision or amendment of the recommendations for vaccination against rabies of dogs, cats, and ferrets set forth in "The Compendium of Animal Rabies Control," to determine whether the revision or amendment made to the recommendations is appropriate for application in this state. For the purpose of enforcing the provisions of this section, a revision or amendment of the recommendations is effective in this state 10 days after its revision or amendment unless the chief of the bureau of animal industry of the division of agriculture of the department of business and industry (state veterinarian) files an objection to the amendment or revision with the state board of health.

(Added to NAC by Bd. of Health, eff. 1-24-92)

441A.440 Veterinarians: Issuance of certificates of vaccination and rabies vaccination tags; cooperation with investigation by rabies control authority.

1. A veterinarian who vaccinates an animal against rabies shall complete ~~{two}~~ *three* copies of a certificate of vaccination against rabies for the animal vaccinated. The certificate of vaccination against rabies must include, but is not limited to:

- (a) The name and address of the owner of the animal.
- (b) A description of the animal, including the name, age, sex, breed, color, and weight of the animal.
- (c) The date the vaccination was administered.
- (d) *The product name* ~~{The type of vaccine used (killed or MLV)}~~.
- (e) The ~~{manufacturer and}~~ lot number of the vaccine.
- (f) The date the animal is due for revaccination based on the duration of immunity provided by the vaccine according to its label.
- (g) The number on the rabies vaccination tag issued pursuant to subsection 3.
- (h) The ~~{name and address}~~ *name, address and license number* of the veterinarian.
- (i) The signature of the veterinarian who administered the vaccine. *The signature of the veterinarian may be handwritten, stamped, or computer generated.*

2. The veterinarian shall give the original copy of the certificate of vaccination against rabies to the owner of the animal, *give a second copy to the rabies control authority* and retain one copy for the period that the vaccination is current.

3. A rabies control authority serving a county or any part of a county with a population greater than 50,000 must maintain a manual or electronic file of certificates of vaccination that can be searched by the name of the owner of the vaccinated animal.

4. A certificate of vaccination in the possession of a rabies control authority as well as data maintained pursuant to subsection 3 is considered confidential and may only be shared with the animal control authority or the health authority.

5. ~~3.~~ A veterinarian who vaccinates an animal against rabies shall issue to the owner a metal rabies vaccination tag, serially numbered to match the number on the certificate of vaccination against rabies. A rabies vaccination tag must not conflict with the shape or color of local license tags.

6. ~~4.~~ A veterinarian shall cooperate with any investigation of an animal bite, or of a case having rabies or suspected case considered to have rabies by providing all information requested by the rabies control authority.

(Added to NAC by Bd. of Health, eff. 1-24-92)

INFORMATIONAL STATEMENT

Health Division
Bureau of Disease Control and Intervention Services
February 26, 1999

1. A description of how public comment was solicited, a summary of public response, and an explanation how other interested persons may obtain a copy of the summary.

Notices of the public hearing were published in the Las Vegas Review Journal and the Las Vegas Sun on January 14, 1999 and the Reno Gazette Journal on January 15, 1999. Public workshops were held in Reno and Las Vegas on November 5, 1999 and November 6, 1999. Notices were also sent to the main library serving each county.

There were seventeen individuals in attendance at the workshop in Reno and nine individuals in attendance at the Las Vegas workshop. The primary area of concern expressed at the workshops was related to insurance companies having to report communicable diseases.

Interested persons may obtain a copy of the summary by contacting the Bureau of Disease Control and Intervention Services, Nevada State Health Division, 505 E. King St., Room 301, Carson City, Nevada 89701, 702-684-5947.

2. The number of persons who:

- (a) **Attended the hearing:** 102
- (b) **Testified at each hearing:** 11
- (c) **Submitted to the agency written statements:** None

3. A description of how comment was solicited from affected businesses, a summary of their response, and an explanation how other interested persons may obtain a copy of the summary:

Notice of the proposed regulations and the public workshop dates were mailed to health districts, animal control departments, veterinary medical associations and insurance companies who were likely to be impacted.

Comments received from veterinarians were primarily concerned about the requirement for a third copy of the rabies vaccination certificate and a database in large jurisdictions. This issue was opposed in northern Nevada but strongly supported in southern Nevada. Comments received from the insurance industry were in opposition to direct reporting of communicable disease information to the State Health Officer.

Interested persons may obtain a copy of the summary by contacting the Bureau of Disease Control and Intervention Services, Nevada State Health Division, 505 E. King St., Room 103, Carson City, Nevada 89710, 702-684-5900.

4. If the regulation was adopted without changing any part of the proposed regulation, a summary of the reasons for adopting the regulation without a change:

After receiving public comment, the proposed regulations were changed as follows:

- Insurers required to report were restricted to life insurance companies.
- Communicable diseases which life insurance companies are required to report were limited to AIDS, HIV infection, Hepatitis A, Hepatitis B, Hepatitis C, Tuberculosis, and Syphilis.

5. The estimated economic effect of the regulation on the business which it is to regulate and on the public. These must be stated separately, and in each case must include:

(a) Both adverse and beneficial effects; and

(b) Both immediate and long term effects.

Business

Adverse: Insurance companies will have to report findings of communicable disease. This is estimated to be a very small number of cases each year.

Beneficial: Insurance companies may avoid some litigation stemming from failure to properly notify individuals of a communicable disease.

Immediate: Minimal costs associated with reporting cases.

Long-term: Minimal costs associated with reporting cases.

Public

Adverse: None

Beneficial: Individuals who are found to have a communicable disease through an insurance examination will receive appropriate public health follow-up. The general public will be better protected because individuals with a communicable disease will not unknowingly transmit to others.

Immediate: None

Long-term: Better ability of public health officials to prevent and control communicable diseases.

6. The estimated cost to the agency for enforcement of the proposed regulation. None.

7. A description of any regulations of other state or government agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the regulation overlaps or duplicates a federal regulation, name the regulating federal agency. None

8. If the regulation includes provisions which are more stringent than a federal regulation which regulates the same activity, a summary of such provisions. None

9. If the regulation provides a new fee or increases an existing fee, the total annual amount the agency expects to collect and the manner in which the money will be used. None

10. If the agency is required to adopt this regulation pursuant to a federal statute or regulation; and exceeds the agency's specific statutory authority or sets forth requirements more stringent than a statute of this state, include a statement that adoption of the regulation is required by federal statute or regulation. None