

**TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH  
CHAPTER 515. COMMUNICABLE DISEASE AND INJURY REPORTING**

**RULEMAKING ACTION:**

PERMANENT final adoption

**RULES:**

Subchapter 1. Disease and Injury Reporting

310:515-1-8 [AMENDED]

**AUTHORITY:**

Commissioner of the Oklahoma State Department of Health; 63 O.S. §§ 1-104, 1-106, 1-502, and 1-503

**SUBMISSION OF PROPOSED RULES TO GOVERNOR AND CABINET SECRETARY:**

October 30, 2023

**COMMENT PERIOD:**

December 1, 2023 through January 2, 2024

**PUBLIC HEARING:**

January 4, 2024

**ADOPTION:**

January 4, 2024

**SUBMISSION OF ADOPTED RULES TO GOVERNOR AND LEGISLATURE:**

January 4, 2024

**APPROVED BY GOVERNOR'S DECLARATION:**

Approved by Governor's declaration on June 21, 2024

**FINAL ADOPTION:**

June 21, 2024

**EFFECTIVE:**

August 11, 2024

**SUPERSEDED EMERGENCY ACTIONS:**

n/a

**INCORPORATIONS BY REFERENCE:**

n/a

**GIST/ANALYSIS:**

This change adds the requirement for COVID-19 specimens to be submitted to the OSDH Public Health Laboratory for variant testing.

**CONTACT PERSON:**

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**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING RULES ARE CONSIDERED FINALLY ADOPTED AS SET FORTH IN 75 O.S., SECTIONS 250.3 (5) AND 308 (E), WITH AN EFFECTIVE DATE OF AUGUST 11, 2024:**

**SUBCHAPTER 1. DISEASE AND INJURY REPORTING**

**310:515-1-8. Organisms/specimens to be sent to the Public Health Laboratory**

(a) Pure bacterial isolates of the following organisms shall be sent to the OSDH Public Health Laboratory for additional characterization, typing or confirmation within two (2) working days (Monday through Friday, state holidays excepted) of final identification or diagnosis.

(1) *Bacillus anthracis*.

- (2) *Brucella* spp.
- (3) Carbapenem-resistant *Enterobacteriaceae*.
- (4) Carbapenem-resistant *Pseudomonas aeruginosa*.
- (5) Carbapenem-resistant *Acinetobacter* spp.
- (6) *E. coli* 0157, 0157:H7, or a Shiga toxin producing *E. coli*.
- (7) *Francisella tularensis*.
- (8) *Haemophilus influenzae* (sterile site).
- (9) *Listeria monocytogenes* (sterile site).
- (10) *Mycobacterium tuberculosis*.
- (11) *Neisseria meningitidis* (sterile site).
- (12) *Salmonella* spp.
- (13) *Vibrionaceae* family (*Vibrio* spp., *Grimontia* spp., *Photobacterium* spp. And other genera in the family).
- (14) *Yersinia* spp.

(b) Following consultation with an OSDH epidemiologist, clinical specimens from suspected cases of Botulism must be sent to the OSDH Public Health Laboratory for testing.

(c) When *Plasmodium* spp. is suspected by a healthcare provider, a Giemsa-stained (or other suitable stain) thin and thick, peripheral blood smear prepared from the EDTA should be submitted in addition to the EDTA purple top blood tube.

(d) ~~Laboratories~~ Laboratories unable to perform reflex culture to isolate/recover the following bacterial pathogens detected by CIDT assays shall submit positive CIDT stool samples in Cary Blair or modified Cary Blair transport media to the OSDH Public Health Laboratory within two (2) working days (Monday through Friday, state holidays excepted) of final CIDT result.

- (1) *E. coli* 0157, 0157:H7, or a Shiga toxin-producing *E. coli*.
- (2) *Salmonella* spp.
- (3) *Vibrio* spp.
- (4) *Yersinia* spp.

(e) Hospitals and laboratories must send, at a minimum, 10% of their weekly positive specimens for SARS-CoV-2 (COVID-19) – PCR or culture positive specimens.