



CITY OF PHILADELPHIA
DEPARTMENT OF PUBLIC HEALTH

PASSED

BOARD OF HEALTH: March 12, 2020
LAW DEPARTMENT: March 12, 2020
RECORDS DEPARTMENT:

**AMENDMENTS TO REGULATIONS
GOVERNING THE CONTROL OF COMMUNICABLE
AND NONCOMMUNICABLE DISEASES AND CONDITIONS**

WHEREAS, the Pennsylvania Disease Control and Prevention Act of 1955, 1956, April 23, P.L. 1510, 35 P.S. § 52.1 *et seq.*, (the DCPA) and Section 6-201 of The Philadelphia Code authorize the Board of Health to establish lists of reportable diseases and conditions; and

WHEREAS, Section 4 of the DCPA and Section 6-202 of the Code require health care providers and laboratories identifying these reportable diseases and conditions designated by the Board, to report the occurrence of such diseases and conditions to the Department; and

WHEREAS, the Philadelphia Board of Health has adopted *Regulations Governing the Control of Communicable and Non-communicable Diseases and Conditions* (“Regulations”); and

WHEREAS, the Regulations contain a listing of such diseases and the methods of reporting the occurrence thereof in Sections 2, 3 and 10 of said Regulations; and

WHEREAS, Section 5 of the DCPA and subsection 6-204(1) of the Code authorize the Department to order the isolation of any person found by the attending physician, osteopath, or by the Department to have any disease listed by the Board as a quarantinable disease, in the place, for such period and in such manner as the Board may by regulation prescribe in order to protect public health and to prevent the spread of such disease; and

WHEREAS, Section 5 of the DCPA and subsection 6-204(2) of the Code authorize the Department to order the quarantine of any person who is reasonably suspected of having or being exposed to any disease listed by the Board as a quarantinable disease in the place and in such manner as the Board may by regulation prescribe in order to protect the public health and prevent the spread of

such disease, but such quarantine shall continue only until such time as a prompt and timely determination is made with the approval of the Department whether any person so quarantined does in fact have or is exposed to such disease; and

WHEREAS, Section 5 of the DCPA and subsection 6-204(3) of the Code authorize the Department to order the isolation of any person found by the attending physician, osteopath, or by the Department to be a carrier of any disease listed by the Board as a quarantinable disease in the place, for such period and in such manner as the Board may by regulation prescribe in order to prevent the spread of disease through such carriers; and

WHEREAS, the Board of Health finds that strains of coronavirus causing severe disease or having pandemic potential, such as those strains associated with SARS, MERS, and COVID-19,¹ are infectious diseases of public health importance, and therefore should be included on the list of reportable conditions in the Regulations; and

WHEREAS, the Board finds that strains of coronavirus associated with severe disease or possessing pandemic potential are infectious diseases of public health importance, and therefore should be subject to regulations imposing isolation and quarantine; and

WHEREAS, the Governor of Pennsylvania issued a Proclamation of Disaster Emergency on March 6, 2020 in response to the imminent and emerging threat of COVID-19 that “urge[d] the governing bodies and executive officers of all political subdivisions affected by this emergency to act as necessary to meet the current exigencies as legally authorized under [such] Proclamation . . . all without regard to those time consuming procedures and formalities normally prescribed by law, mandatory constitutional requirement excepted.” Commonwealth of Pennsylvania Proclamation of Disaster Emergency, March 6, 2020; and

WHEREAS, given the imminent and emerging threat of COVID-19, the Department respectfully requested that the Mayor suspend the requirements of Section 8-407 of the Philadelphia Home Rule Charter and allow regulations concerning COVID-19, including the

¹ SARS=Severe Acute Respiratory Syndrome; MERS=Middle East Respiratory Syndrome; COVID-19=2019 novel coronavirus disease

instant regulation, to be promulgated as a temporary regulation while the procedures of Section 8-407 are complied with simultaneously, and the Mayor signed such a declaration on March 11, 2020; and

WHEREAS, consistent with such declaration, the Board hereby promulgates the below amendment as a temporary regulation effective upon delivery to the Department of Records, while the remaining procedures and formalities of Section 8-407 are followed to promulgate the amendment as a permanent regulation;

NOW, THEREFORE, the Board of Health hereby amends the *Regulations Governing the Control of Communicable and Non-communicable Diseases and Conditions* to read as follows (additions in **Bold** and deletions in ~~Strikethrough~~):

REGULATIONS GOVERNING THE CONTROL OF COMMUNICABLE
AND NONCOMMUNICABLE DISEASES AND CONDITIONS

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2. REPORTABLE DISEASES AND CONDITIONS

The Board declares the following diseases, unusual outbreaks of illness, noncommunicable diseases and conditions, poisonings and occupational diseases to be reportable:

- (a) Diseases, Conditions, Etc.

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(*) **Coronavirus, strains causing severe disease or having pandemic potential**

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~~(38.1) Severe Acute Respiratory Syndrome (SARS)~~

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10. REGULATIONS PERTAINING TO THE CONTROL OF THE INFECTED
INDIVIDUALS, CONTACTS, AND ENVIRONMENT FOR EACH REPORTABLE DISEASE

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(*) Coronavirus, strains causing severe disease or having pandemic potential

(1) Reporting. Report to the Acute Communicable Disease Control Program by telephone or other equally prompt means immediately, and not more than within 24 hours of suspicion.

a. A strain of coronavirus causing severe disease or having pandemic potential is one that is either (i) capable of causing severe respiratory disease, such as pneumonia or Acute Respiratory Distress Syndrome, (ii) otherwise having potential to produce a pandemic, or both. Such strains include, but are not limited to, those associated with SARS, MERS, COVID-19,¹ and future novel strains meeting this definition.

(2) Isolation. Patient shall be isolated in a hospital, its equivalent, or home, until the communicable period is over. The communicable period will be defined by the Department in accord with characteristics of the specific pathogen. For hospitalized cases, precautions should consist of airborne, droplet, and contact precautions.

(3) Concurrent disinfection. Infection control precautions appropriate to interrupt spread of respiratory droplets, hand hygiene and thorough cleaning of patient rooms and bathroom facilities and appropriate disposal or washing of linens and articles contaminated by body fluids.

(4) Terminal Disinfection. Terminal disinfection shall consist of thorough cleaning and disinfection. Because of the potential for airborne transmission, unprotected individuals should not enter a vacated room until sufficient time has elapsed for air exchanges to remove potentially infectious particles. If the rate of air exchange is known, use references materials to determine when a room can be safely entered. If the rate of air exchange for a room is unknown, the room should be vacated for a minimum of four hours.

(5) Quarantine. If deemed necessary by the Department, persons who had close contact with individuals with novel strains of coronavirus will be confined for a specified period of time following the most recent exposure, and monitored by the Department for the appearance of disease symptoms. The duration of confinement will be determined by the Department in accord with characteristics of the specific pathogen.

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~~(kk.1) SARS (Infections with SARS Coronavirus)~~

~~(1) Reporting.~~ Report to the Acute Communicable Disease Control Program by telephone or other equally prompt means immediately, and not more than within 24 hours of suspicion.

~~(2) Isolation.~~ Patient shall be isolated in a hospital, its equivalent, or home, until 10 days after resolution of fever. For hospitalized cases, precautions should consist of airborne, droplet, and contact precautions.

~~(3) Concurrent disinfection.~~ Infection control precautions appropriate to interrupt spread of respiratory droplets, hand hygiene and thorough cleaning of bathroom facilities and appropriate disposal or washing of linens and articles contaminated by body fluids.

~~(4) Terminal Disinfection. Terminal disinfection shall consist of thorough cleaning and disinfection.~~

~~(5) Quarantine. If deemed necessary by the Department, persons who had close contact with individuals with SARS will be confined for 10 days following the most recent exposure, and monitored by the Department for the appearance of disease symptoms.~~

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