

# STD Project Area Point of Contacts (POC) with Data Sharing Protocols for using Interstate Communication Control Records

**September 2021**

## Background

For several decades, the Interstate Communication Control Record (ICCR) has been used as a resource for STD programs to systematically maintain confidentiality while sharing client information between domestic jurisdictions to conduct public health prevention activities. ICCR facilitates data sharing to ensure at-risk or infected individuals are offered STD prevention services outside of the initiating jurisdiction. This includes the confidential follow-up of exposed sex partners, infected persons who need treatment or other services, and others in need of STD prevention services. This ICCR document consists of a roster of STD prevention program points of contact (POCs) in the United States, Puerto Rico and the US Virgin Islands, as well as directly-funded cities. These POCs have been authorized by their STD program directors to accept and share confidential public health information from one jurisdiction to another so that individuals in need of prevention services may be reached promptly, professionally, and confidentially.

The Council of State and Territorial Epidemiologists (CSTE) approved a position statement in 2003 (03-ID-10) clarifying processes to be used by health departments in determining residence for disease reporting purposes. The position statement also specifies which jurisdiction should take responsibility for reporting cases to CDC through the National Notifiable Diseases Surveillance System (NNDSS) when they are determined to live out of jurisdiction at the onset of illness. Rules guiding decisions for persons on vacation, homeless persons, people with multiple residences, students, military personnel, persons in jails/institutions and foreign nationals are described. Also included in this position statement are rules clarifying appropriate values for the 'IMPORTED' variable in the core National Electronic Telecommunications System for Surveillance (NETSS) record. This document is a useful reference for most of the situations commonly encountered in STD surveillance. The CSTE position statement can be assessed here: [Council of State and Territorial Epidemiologists Position Statement](#)

## Confidentiality

Health Departments should consult and follow the recommendations in the Data Security and Confidentiality Guidelines

(See: [Data Security and Confidentiality Guidelines](#)) to ensure confidentiality is protected and maintained across jurisdictions. Communications between public health jurisdictions, including the protection of confidential information, is the responsibility of each project area. Information sharing between jurisdictions should be limited to the ICCR Coordinators to ensure confidentiality is maintained. Moreover, the Data Security and Confidentiality Guidelines recommend that written data sharing plans serve as a starting point for discussion about data sharing between public health programs. Having a plan in writing can also formalize procedures and help resolve any conflicts. (See page 7 of the Data Security and Confidentiality Guidelines). CDC is not directly involved in the sharing of confidential data through ICCR. Health departments should work collaborative to protect confidentiality across jurisdictions.

Health Departments considering the use of facsimile machines to share information should refer to Appendix F of the Data Security and Confidentiality Guidelines, “Guidelines for the Use of Facsimile Machines”, to identify ways to protect confidentiality when using fax machines. For your convenience, the ‘Guidelines for the Use of Facsimile Machines’ are also provided on page 74 of this document.

Health Departments considering using mail to transmit their confidential information should develop and follow a written policy on mailing confidential materials for their jurisdiction (for more information see Standard 4.3 on p. 26 in the Data Security and Confidentiality Guidelines). Regardless of the mechanism, confidential public health information should be shared securely and promptly to ensure public health follow-up is timely and confidential wherever it occurs.

## How to use this Document

ICCR should be used to identify and confidentially contact POCs in other jurisdictions to inform them about individuals in their jurisdiction in need of STD prevention services. Examples of when ICCR may be used to conduct out of jurisdiction (OOJ) activities include individuals living in another state who either have tested positive for an STD or have been named as a sex partner of an infected person. When cross-jurisdictional public health follow-up is needed, staff should gather all pertinent locating, medical, and risk information of the individual in need of services and share it confidentially with their jurisdiction's ICCR POC. The initiating ICCR POC will then contact the ICCR POC in the receiving jurisdiction; using ICCR to identify the receiving POC, the acceptable mechanism for information sharing, and type of investigations that are accepted. In addition to POCs, ICCR lists the type of follow-up each jurisdiction accepts and the desired method of communication. Through these established points of contact, jurisdictions may share data efficiently and confidentially. The following are common scenarios for sharing STD prevention data. **Examples are for illustrative purposes only. Final dispositions should be shared with the initiating project area whenever practical.**

### Positive Syphilis Laboratory Test

A positive laboratory test, absent any treatment or diagnostic information, should be forwarded from the project area where the test was performed to the patient's resident project area. Patient contact should follow the receiving project area's standard protocols and procedures. Any resultant morbidity lies with the resident project area.

**Example:** John Doe is seen by a health care provider in Worcester Massachusetts and lives in Hartford Connecticut. A positive RPR and FTA are reported to the Massachusetts STD prevention program. No treatment or history exists in Massachusetts. The Massachusetts STD program should forward the positive serology results to the Connecticut STD prevention program for follow-up as per Connecticut's standard protocols. If a new case of syphilis, morbidity belongs to Connecticut.

### Positive Chlamydia and/or Gonorrhea Laboratory Test

A positive laboratory test, with or without treatment or diagnostic information, should be forwarded from the project area where the test was performed to the patient's resident project area. Patient contact should follow the receiving project area's standard protocols and procedures. Morbidity lies with the resident project area.

**Example:** Jane Doe is seen by a health care provider in Milwaukee Wisconsin, and lives in Chicago Illinois. A positive GC NAAT is reported to the Wisconsin STD Prevention program. Treatment is verified. The Wisconsin STD prevention program should forward the positive GC NAAT result and treatment information to the Chicago STD prevention program for follow-up as per Chicago's standard protocols. Morbidity belongs to Chicago. Data sharing process remains the same if treatment was not provided;

information should be forwarded to the Chicago STD prevention program for follow-up as per their protocols. Morbidity still belongs to Chicago.

### Diagnosed Case of Syphilis

A confirmed case of syphilis (positive laboratory plus verified treatment and diagnosis) should be forwarded from the project area where the case was diagnosed and treated to the patient's resident project area. Initiating project area should note the need (or not) for interview and partner services. Patient contact should follow the receiving project area's standard protocols and procedures. Any resultant morbidity lies with the resident project area.

**Example:** John Smith is diagnosed with secondary syphilis and appropriately treated in Washington DC and lives in Potomac Maryland. The DC STD prevention program should forward all necessary case information to the Maryland STD prevention program for follow-up as per Maryland's standard protocols. Morbidity lies with Maryland.

### Partner Services

Partner information should be forwarded from the project area where the information was gathered to the partner's resident project area. Follow-up will proceed according to the receiving project area's standard protocols as reflected in this document (some project areas will NOT accept partners to CT or GC).

**Example:** Jane Smith is named as a contact to an early-latent case of syphilis in New Orleans Louisiana. Jane lives in Dallas Texas. The Louisiana STD prevention program should forward all necessary information to provide partner notification services to Jane to the Texas STD prevention program.

**There is no need to forward any ICCR requests, domestic or international, to DSTDP. Data sharing should occur directly between STD-PCHD project areas.**

The following pages list the STD ICCR points of contact in each of the STD-PCHD-awarded project areas (fifty states, seven directly-funded cities, and two territories), as well as all provinces in Canada. HIV ICCR points of contact are included to facilitate data sharing for the purposes of HIV prevention activities.

Updates to STD ICCR points of contact can be sent to [std\\_pchd@cdc.gov](mailto:std_pchd@cdc.gov).

# Table of Contents

ALABAMA .....	<b>Error! Bookmark not defined.</b>
ALASKA .....	9
ARIZONA.....	11
ARKANSAS .....	14
BALTIMORE CITY .....	16
CALIFORNIA.....	18
CHICAGO .....	20
COLORADO.....	21
CONNECTICUT .....	23
DELAWARE .....	24
FLORIDA .....	26
GEORGIA .....	28
HAWAII.....	30
IDAHO.....	32
ILLINOIS .....	34
INDIANA .....	36
IOWA .....	39
KANSAS.....	41
KENTUCKY .....	43
LOS ANGELES.....	45
LOUISIANA.....	47
MAINE .....	49
MARYLAND.....	50
MASSACHUSETTS .....	52
MICHIGAN .....	54
MINNESOTA .....	56
MISSISSIPPI.....	58
MISSOURI .....	61
MONTANA.....	63
NEBRASKA .....	65

NEVADA.....	67
NEW HAMPSHIRE.....	69
NEW JERSEY .....	71
NEW MEXICO .....	73
NEW YORK CITY.....	75
NEW YORK STATE.....	77
NORTH CAROLINA.....	79
NORTH DAKOTA .....	81
OHIO.....	82
OKLAHOMA.....	84
OREGON .....	86
PENNSYLVANIA (Excluding Philadelphia).....	88
PHILADELPHIA.....	90
PUERTO RICO .....	92
RHODE ISLAND .....	93
SAN FRANCISCO .....	95
SOUTH CAROLINA .....	96
SOUTH DAKOTA .....	98
TENNESSEE.....	99
TEXAS .....	100
USVI.....	101
UTAH .....	103
VERMONT.....	105
VIRGINIA.....	106
WASHINGTON D.C.....	108
WASHINGTON.....	112
WEST VIRGINIA .....	114
WISCONSIN .....	115
WYOMING.....	116
CANADA (All Provinces) .....	117

## ALABAMA

Alabama Department of Public Health-STD Division  
201 Monroe St.

Montgomery, AL 36104

Hours of Operation: 8:30 am – 5:00 pm Central

Note: OOJ information must provide minimum patient location information e.g. name or telephone number or address or all of the above.

**Point of Contact:** Supervisor Beverly Frank

**Main Number:** 334-206-5350

### Syphilis

**Point of Contact:** Brenda Cole

**Phone:** 334 206-7032 (confidential voice)

**Fax:** 334-206-2768 **Email:** Brenda.Cole@adph.state.al.us

**Point of Contact:** Beverly Thomas

**Phone:** 334 206-2772 (confidential voice)

**Email:** beverly.thomas@adph.state.al.us

**Point of Contact:** Anthony Merriweather

**Phone:** 334 206-2765 (confidential voice)

**Email:** anthony.merriweather@adph.state.al.us

**Syphilis stages/reactors accepted and followed:** All syphilis stages.

**Method(s) of transmitting confidential patient data:** Securely call, fax, or mail to POC.

**Return of disposition/time frame:** Yes; two weeks

### HIV

**Point of Contact:** Brenda Cole or Beverly Thomas or Anthony Merriweather  
(Contact information is same as above.)

**HIV cases/contacts followed:** All HIV cases/contacts.

**Method(s) of transmitting confidential patient data:** Securely call, fax, or mail to POC.

**Return of disposition/time frame:** Yes; one month

### Gonorrhea (GC)

**Point of Contact:** Brenda Cole or Beverly Thomas or Anthony Merriweather  
(Contact information is same as above.)

**GC cases/contacts accepted and followed:** All GC cases/ contacts.

**Method(s) of transmitting confidential patient data:** Securely call, fax, or mail to POC.

**Return of disposition/time frame:** Yes; two weeks.

## Chlamydia (CT)

**Point of Contact:** Brenda Cole or Beverly Thomas or Anthony Merriweather  
(Contact information is same as above.)

**Method(s) of transmitting confidential patient data:** Securely mail all correspondence to:  
201 Monroe St., Montgomery, AL 36104.

Return of disposition/time frame: Yes, two weeks.



## ALASKA

State of Alaska – Dept. of Health & Social Services  
Section of Epidemiology – HIV/STD Program  
3601 C Street, Suite 540  
Anchorage, AK 99503  
907-269-8000

**Hours of Operation:** 8:00am and 4:30pm (Alaska Time Zone)  
(Alaska Time Zone is 4 hours behind Eastern Time)

### Syphilis

**Point of Contact:** Jennifer “Claire” Stump  
**Email:** [Jennifer.stump@alaska.gov](mailto:Jennifer.stump@alaska.gov) (please do not email confidential information)  
**Phone:** 907-269-8063 (confidential line)  
**Fax:** 907-561-4239 (confidential line)

**Backup Point of Contact:** Nathan Wormington  
**Email:** [Nathan.wormington@alaska.gov](mailto:Nathan.wormington@alaska.gov) (please do not email confidential information)  
**Phone:** 907-269-8087 (confidential line)  
**Fax:** 907-561-4239 (confidential line)

**Syphilis stages/reactors accepted and followed:** All P&S, EL cases and all named partners, sexual network contacts, and associates. Internet partners will be followed.

**Method(s) of transmitting confidential patient data:** Securely fax or call POC.

\*Please include originating agency name and point of contact information on all transmissions.  
Return of disposition/time frame: All dispositions will be returned upon closure.

**For syphilis record searches contact:** Fax to Claire Stump at 907-561-4239 (confidential line) or call Claire Stump at 907-269-8063 (confidential line).

### HIV

**Point of Contact:** Jennifer “Claire” Stump  
**Email:** [Jennifer.stump@alaska.gov](mailto:Jennifer.stump@alaska.gov) (please do not email confidential information)  
**Phone:** 907-269-8063 (confidential line)  
**Fax:** 907-561-4239 (confidential line)

**Backup Point of Contact:** Sarah Brewster

**Email:** [sarah.brewster@alaska.gov](mailto:sarah.brewster@alaska.gov) (please do not email confidential information)

**Phone:** 907-269-8057 (confidential line)

**Fax:** 907-561-4239 (confidential line)

**HIV cases/contacts followed:** All named partners, sexual network contacts and associates; all newly identified infections; prior infections with a current STD or when named as an unsafe partner. Internet partners will be followed.

**Method(s) of transmitting confidential patient data:** Securely call or fax POC.

\*Please include originating agency name and point of contact information on all transmissions.  
Return of disposition/time frame: All dispositions will be returned upon closure.

Gonorrhea (GC) / Chlamydia (CT)

**Point of Contact:** Hesper Clemons

**Email:** [hesper.clemons@alaska.gov](mailto:hesper.clemons@alaska.gov) (please do not email confidential information)

**Phone:** 907-269-8064 (confidential line)

**Fax:** 907-561-4239 (confidential line)

**Backup Point of Contact:** Jennifer “Claire” Stump

**Email:** [Jennifer.stump@alaska.gov](mailto:Jennifer.stump@alaska.gov) (please do not email confidential information)

**Phone:** 907-269-8063 (confidential line)

**Fax:** 907-561-4239 (confidential line)

**GC/CT cases/contacts are not currently being assigned for public health intervention.**

**Method(s) of transmitting confidential patient data:** Securely call or fax POC.

\*Please include originating agency name and point of contact information on all transmissions.

## ARIZONA

The following information is intended for jurisdictions outside of Arizona. This section identifies the 4 reportable STD's, the point of contact, and information required from the jurisdiction for follow-up from Arizona county health departments. In the absence of the ICCR Coordinator, an alternative contact person will assume this role. All Arizona health departments and out of jurisdiction entities will be notified of the temporary contact information in advance.

Arizona Department of Health Services  
Sexually Transmitted Disease Control Program  
150 N. 18th Ave, Ste 280  
Phoenix, AZ 85007-3237  
**Phone:** 480-433-4803 (confidential)  
**Fax:** 602-542-0150 (confidential)

### Syphilis

**Point of Contact:** Letty Medina  
**Email:** [Letty.Medina@azdhs.gov](mailto:Letty.Medina@azdhs.gov)  
**Phone:** 480-433-4803 (confidential)  
**Fax:** 602-542-0150 (confidential)

#### **Accepted and followed:**

Syphilis reactors and contacts to Syphilis cases (with the exception of (745) Late, Latent Syphilis).

MUST include demographic information (complete name or alias, DOB or age, city/state or county/state).

Documentation of previous attempts of locating and outcome; phone calls, e-mails, texts, place of employment, etc.

Exposure dates and pregnancy status of contacts.

#### **Methods of transmitting confidential patient data:**

Call or fax attention to POC

#### **Return of disposition and time frame:**

By request

4 Weeks

### Congenital Cases (ONLY)

**Point of Contact:** Bree Anderson  
**Email:** [Breanne.anderson@azdhs.gov](mailto:Breanne.anderson@azdhs.gov)  
**Phone:** 602-542-9367 (confidential)  
**Fax:** 602-542-0150 (confidential)

**Methods of transmitting confidential patient data:**

Call or fax, attention to POC

**Return of disposition and time frame:**

By request

**Gonorrhea:**

**Point of Contact:** Letty Medina

**Email:** Letty.Medina@azdhs.gov

**Phone:** 602-364-4666 (confidential)

**Fax:** 602-542-0150 (confidential)

**Accepted and followed:**

Only accept with Syphilis (with the exception of (745) Late, Latent Syphilis).

**Methods of transmitting confidential patient data:**

Call or fax attention to POC

**Return of disposition time frame:**

By request

2 Weeks

**Chlamydia**

**Point of Contact:** Letty Medina

**Email:** Letty.Medina@azdhs.gov

**Phone:** 602-364-4666 (confidential)

**Fax:** 602-542-0150 (confidential)

**Accepted and followed:**

Only accept with Syphilis (with the exception of (745) Late, Latent Syphilis).

**Methods of transmitting confidential patient data:**

Call or fax attention to POC

Disposition will not be returned.

**HIV**

\*The ADHS HIV Surveillance Program processes all HIV cases/contacts and HIV co-morbid cases/contacts. Please follow up with ADHS HIV Surveillance Point of Contact below\*

**Point of Contact:** Rosalinda Avila

**Email:** [Rosalinda.Avila@azdhs.gov](mailto:Rosalinda.Avila@azdhs.gov)

**Phone:** 602-364-3655 (confidential)

**Fax:** 602-542-1120 (confidential)

**HIV cases/contacts accepted and followed:**

All newly identified HIV and co-morbid infections and contacts to HIV cases

Must include demographic information (complete name or alias, age/DOB, and race/ethnicity) and at least two forms of locating information including; specific and complete description of the contact/case, address, phone number or directions for locating contact/case.

Documentation of previous attempts of locating and outcome; phone calls, e-mails, texts, place of employment, etc.

**Methods of transmitting confidential patient data:**

Call or fax attention to ADHS HIV Surveillance POC

**Return of disposition time frame:** 2 weeks

## ARKANSAS

Arkansas Department of Health  
STI/HIV/Hepatitis C/Tuberculosis Section  
4815 West Markham Street, Mail slot # 33  
Little Rock, AR 72205-3867

**Hours of Operation:** 8:00 a.m. – 4:30 p.m. Monday – Friday CST (except holidays).

### Syphilis

**Point of Contact:** Marie Wilson  
**Email:** Eleanor.Wilson@arkansas.gov  
**Phone:** 501-280-4036  
**Fax:** 501-661-2035

**Syphilis stages/reactors accepted and followed:** Partners, associates and sexual network contacts, all syphilis reactors under 45; all pregnant patients.

**Method(s) of transmitting confidential patient data:** Call, fax of mail POC.

**Return of disposition/time frame:** Yes, twenty days (allowed ten working days).

### HIV

**Point of Contact:** Keeven Murphy  
**Email:** Keeven.Murphy@arkansas.gov  
**Phone:** 501-661-2887  
**Fax:** 501-280-4120

**HIV cases/cases followed:** All

**Method(s) of transmitting confidential patient data:** Call, fax of mail POC.

**Return of disposition/time frame:** Yes, twenty days (ten working days).

### Gonorrhea (GC)

**Point of Contact:** Jawaski Fisher  
**Email:** Jawaski.Fisher@arkansas.gov  
**Phone:** 501-280-4143  
**Fax:** 501-661-2035

**Point of Contact:** Marlene Roy  
**Email:** Marlene.Roy@arkansas.gov  
**Phone:** 501-661-2140  
**Fax:** 501-661-2035

**GC cases/contacts accepted and followed:** All

**Method(s) of transmitting confidential patient data:** Call, fax or mail POC.

**Return of disposition/time frame:** Yes, twenty days (ten working days).

### Chlamydia (CT)

**Point of Contact:** Marlene Roy

**Email:** Marlene.Roy@arkansas.gov

**Phone:** 501-661-2140

**Fax:** 501-661-2035

**Point of Contact:** Jawaski Fisher

**Email:** Jawaski.Fisher@arkansas.gov

**Phone:** 501-280-4143

**Fax:** 501-661-2035

**CT cases/contacts accepted and followed:** All

**Method(s) of transmitting confidential patient data:** Call, fax or securely mail POC

**Return of disposition/time frame:** Yes, twenty days (ten working days)

## BALTIMORE CITY

STD/HIV Prevention Program  
1001 East Fayette Street  
Baltimore MD 21202

**Hours of Operation:** 9:00 am to 4:30 pm.

### Syphilis

**Point of Contact:** Carla Latney Health Program Administrator

**Email:** Carla.Latney@baltimorecity.gov

**Phone:** 410-396-4448

**Fax:** 410-625-0688

**Point of Contact:** Rhonda Overton, Administrative Assistance Title 3

**Email:** Rhonda.Overton@baltimorecity.gov

**Phone:** 410-396-4448

**Fax:** 410-625-0688

**Syphilis stages/reactors accepted and followed:** We accept all syphilis reactors and partners to syphilis cases. Please provide as much locating information as possible.

**Method(s) of transmitting confidential patient data:** Call or fax POINT OF CONTACT

**Return of disposition/time frame:** Yes, return disposition in two weeks. Please call POINT OF CONTACT to check on disposition if you do not receive a return call.

### HIV

**Point of Contact:** Carla Latney, Health Program Administrator  
(Contact information is same as above.)

**Point of Contact:** Rhonda Overton, Administrative Assistance Title 3  
(Contact information is same as above)

**Point of Contact:** Nathalie Wilson, HIV reactor desk coordinator

**Email:** Nathalie.wilson@baltimorecity.gov

**Phone:** 410-396-4448

**HIV cases/contacts followed:** We accept all HIV reactors and partners to HIV cases. Please provide as much locating information as possible.

**Method(s) of transmitting confidential patient data:** Call or fax POINT OF CONTACT.

Return of disposition/time frame: 30 days



## Gonorrhea (GC)

**Point of Contact:** Carla Latney Health Program Administrator  
(Contact information is same as above.)

**Point of Contact:** Rhonda Overton, Administrative Assistance Title 3  
(Contact information is same as above)

**GC cases/contacts accepted and followed:** We do not accept contacts for follow-up.

**Method(s) of transmitting confidential patient data:** Call or fax POINT OF CONTACT.

**Return of disposition/time frame:** Yes, return disposition in two weeks. Please call POINT OF CONTACT to check on disposition if you do not receive a return call.

## Chlamydia (CT)

**Point of Contact:** Carla Latney Health Program Administrator  
(Contact information is same as above).

**Point of Contact:** Rhonda Overton, Administrative Assistance Title 3  
(Contact information same as above)

**CT cases/contacts accepted and followed:** We do not accept contacts for follow-up.

**Method(s) of transmitting confidential patient data:** Call or fax POINT OF CONTACT.

**Return of disposition/time frame:** Yes, return disposition in two weeks. Please call POINT OF CONTACT to check on disposition if you do not receive a return call.

## CALIFORNIA

(Not including Los Angeles or San Francisco; these areas are listed below)

California Department of Public Health

STD Control Branch, MS 7320

1616 Capitol Avenue, Suite 74.660

P.O. Box 997377

Sacramento, CA 95899-7377

**Hours of Operation:** 7:30am – 3:30pm PST

**Surveillance Supervisor:** Denise Gilson

**Phone:** 916-552-9812

### Syphilis

**Point of Contact:** Kirsten Taylor (Same address as listed above)

**Phone:** 916-552-9811 (with confidential voice mail)

**Fax:** 916-636-6212

**Email:** [Kirsten.taylor@cdph.ca.gov](mailto:Kirsten.taylor@cdph.ca.gov)

**Syphilis stages/reactors accepted and followed:** All P&S, EL; reactors followed per California Project Area (CPA) reactor grid and local health jurisdiction reactor grids.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, two weeks-one month (depending on local HD).

### Partners to HIV

**Point of Contact:** Kirsten Taylor (Same contact information as listed above)

**Method(s) of transmitting confidential patient data:** Call or fax POC .

**Return of disposition/time frame:** Yes, two weeks- one month (depending upon local HD).

### Gonorrhea (GC)

**Point of Contact:** Kirsten Taylor (Same contact information as listed above)

**GC cases/contacts accepted and followed:** Only accepts and follows up on patients who are infected with GC and need treatment. GC contacts may not be followed by all local health jurisdictions.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, Two weeks-one month (depending upon local health jurisdiction).

### Chlamydia (CT)

**Point of Contact:** Kirsten Taylor (Same contact information as listed above)

**CT cases/contacts accepted and followed:** Only accepts and follows up on patients who are infected with CT and need treatment. CT contacts may not be followed by all local health

jurisdictions.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** No

## CHICAGO

Chicago Department of Public Health

STI/HIV Division, STI Surveillance Unit

333 S. State Street, Suite 210

Chicago, Illinois 60604

**Hours of Operation:** 8:00 a.m. – 4:00 p.m.

Program Director, Tammy Rutledge, MHA, ASQ CQA

312/747-9661

### Syphilis

**Point of Contact:** Maria Vega

**Email:** [maria.vega2@cityofchicago.org](mailto:maria.vega2@cityofchicago.org)

**Phone:** 312-747-0372

**Secure Fax:** 312-747-0699 (secure fax) **Backup Fax:** 312-745-3923

**Method(s) of transmitting confidential patient data:** secure fax or secure email (HAN), NO PHONE CALLS

### HIV

**Point of Contact:** Luz Vazquez-Perez

**Phone:** 312-744-7432

**Email:** [luz.Vazquez-Perez@cityofchicago.org](mailto:luz.Vazquez-Perez@cityofchicago.org)

### Chlamydia

**Point of Contact:** Maria Vega

**Email:** [maria.vega2@cityofchicago.org](mailto:maria.vega2@cityofchicago.org)

**Phone:** 312-747-0372

**Secure Fax:** 312-747-0699 (secure fax) **Backup Fax:** 312-745-3923

**Method(s) of transmitting confidential patient data:** secure fax or secure email (HAN), NO PHONE CALLS

### Gonorrhea

**Point of Contact:** Maria Vega

**Email:** [maria.vega2@cityofchicago.org](mailto:maria.vega2@cityofchicago.org)

**Phone:** 312-747-0372

**Secure Fax:** 312-747-0699 (secure fax) **Backup Fax:** 312-745-3923

**Method(s) of transmitting confidential patient data:** secure fax or secure email (HAN), NO PHONE CALLS

To share ICCR information by secure e-mail, please visit Chicago HAN to register for the service.

## COLORADO

Colorado Dept. of Public Health & Environment

STI/HIV Laboratory Surveillance Unit

DCEED-STD-A3

4300 Cherry Creek Drive South

Denver, CO 80246-1530

**Hours of Operation:** 8:00am to 5:00pm MT

### Syphilis

**Point of Contact:** Adrianna Hervey

**Email:** adrianna.hervey@state.co.us

**Phone:** 303-692 2694

**Fax:** 303-782 5393

**Syphilis stages/reactors accepted and followed:** P&S, EL/ All reactors and all ages. Cases and Contacts. Please include exposure dates.

**Method(s) of transmitting confidential patient data:** Phone or fax POC

**Return of disposition/time frame:** Yes, thirty days.

### HIV

**Point of Contact:** Adrianna Hervey

**HIV cases/contacts followed:** All newly diagnosed. Cases and Contacts. Please include exposure dates.

**Method(s) of transmitting confidential patient data:** Phone or fax POC.

**Return of disposition/time frame:** Yes, thirty days

### Gonorrhea (GC)

**Point of Contact:** Adrianna Hervey

GC cases/contacts accepted and followed only Resistant GC. Cases and Contacts. Please include exposure dates

**Method(s) of transmitting confidential patient data:** Phone or fax POC.

**Return of disposition/time frame:** No

### Chlamydia (CT)

**Point of Contact:** Adrianna Hervey

**CT cases/contacts accepted and followed:** None at this time.

**Method(s) of transmitting confidential patient data:** Phone or fax POC

**Return of disposition/time frame:** No

**Back Up Contact:** Nedra Freeman

**Email:** nedra.freeman@state.co.us

**Phone:** 303-692-2705

**Fax:** 303-782 5393

## CONNECTICUT

Connecticut Department of Health  
410 Capitol Avenue,  
MS#11STD  
Hartford, CT 06134-0308  
**Hours of Operation:** 9:00am – 4:00pm

### Syphilis

**Point of Contact:** Angela Cumberbatch  
**Email:** angela.cumberbatch@ct.gov  
**Phone:** 860-509-7920  
**Fax:** 860-509-7275

**Syphilis stages/reactors accepted and followed:** All syphilis stages/reactors accepted.  
**Method(s) of transmitting confidential patient data:** Call or fax POC.  
**Return of disposition/time frame:** four weeks

### HIV

**Point of Contact:** Angela Cumberbatch (Same contact information as listed above)  
**HIV cases/contacts followed:** All cases and contacts are followed.  
**Method(s) of transmitting confidential patient data:** Call or fax POC.  
**Return of disposition/time frame:** four weeks

### Gonorrhea (GC)

**Point of Contact:** Angela Cumberbatch (Same contact information as listed above).  
**GC cases/contacts accepted and followed:** All cases/contacts  
**Method(s) of transmitting confidential patient data:** Call or fax POC.  
**Return of disposition/time frame:** four weeks

### Chlamydia (CT)

**Point of Contact:** Angela Cumberbatch (Same contact information as listed above).  
**CT cases/contacts accepted and followed:** CT cases only  
**Method(s) of transmitting confidential patient data:** Call or fax POC.  
**Return of disposition/time frame:** four weeks

## DELAWARE

State of Delaware

Division of Public Health

STD Program

417 Federal Street

Dover, DE 19901

**Hours of Operation:** 8:00am – 3:00pm, EST

### Syphilis

**Point of Contact:** Shane Dearman

**Phone:** 302-744-1025 (direct line)

**Email:** Shane.dearman@delaware.gov

**Syphilis stages/reactors accepted and followed:** All P&S, EL/ all reactors under age 60.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Yes, two weeks

### HIV- CASES

**Point of Contact:** Jim Dowling

**Phone:** 302-744-1016

**Email:** James.Dowling@delaware.gov

**HIV cases/contacts followed:** All new infections; prior infections with a current STD

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Yes, two weeks.

### HIV- Partners

**Point of Contact:** Brianna Kresse

**Phone:** 302-744-1018

**Email:** Brianna.Kresse@delaware.gov

**HIV partners followed:** All new infections; prior infections with a current STD

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Yes, two weeks.

### Gonorrhea (GC)

**Point of Contact:** Shane Dearman

**Phone:** 302-744-1025

**Email:** Shane.Dearman@delaware.gov



**GC cases/contacts accepted and followed:** infected and untreated patients only.

**Method(s) of transmitting confidential patient data:** Call POC for infected, untreated follow-ups.

**Securely mail contacts to:** Shane Dearman DPH/STD Program, 417 Federal Street, Dover, DE 19901.

**Return of disposition/time frame:** No

### Chlamydia (CT)

**Point of Contact:** Shane Dearman

**Phone:** 302-744-1025

**Email:** Shane.Dearman@delaware.gov

**CT cases/contacts accepted and followed:** infected and untreated patients only.

**Method(s) of transmitting confidential patient data:** Call POC for infected, untreated follow-ups.

**Mail contacts to:** Shane Dearman DPH/STD Program, 417 Federal St., Dover, DE 19901.

**Return of disposition/time frame:** No

## FLORIDA

Florida Department of Health  
4052 Bald Cypress Way  
Bin A-19  
Tallahassee, FL 32399-1716

**Hours of Operation:** 8:00am to 5:00pm, ET

### Syphilis and HIV Record Searches

**Point of Contact:** Lashunda “Dali” Williams: Conducts both incoming and outgoing 700/900 record searches requests.

**Email:** [Lashunda.Williams@flhealth.gov](mailto:Lashunda.Williams@flhealth.gov)

**Phone:** (850) 756-1310 or (850) 901-6607

**Fax:** 850-412-2204

HIV Backup (900 record searches):

**Point of Contact:** Della Buckles, conducts 900 record searches

**Phone:** (850) 245-4582

Alternate Backup:

**Point of Contact:** Dan George

**Phone:** (850) 245-4314

### Syphilis Partner Services

**Point of Contact:** Valerie Ellis

**Email:** [Valerie.Ellis@flhealth.gov](mailto:Valerie.Ellis@flhealth.gov)

**Phone:** 850-245-4325 or (850) 553-0289

**Fax:** 850-412-2204

**Method(s) of transmitting confidential patient data:** Call, fax **Return of disposition/time frame:** Two weeks

For contacts, please provide stage of disease exposure (i.e., contact to 710, 720, 730, 755).

Syphilis contacts must include demographic information (complete name or alias, DOB or age, city/state or phone number) to initiate any partner.

### HIV Partner Services

**Point of Contact:** Valerie Ellis

**Email:** [Valerie.Ellis@flhealth.gov](mailto:Valerie.Ellis@flhealth.gov)

**Phone:** 850-245-4325 or (850) 553-0289

**Fax:** 850-412-2204

**HIV cases/contacts followed:** All HIV positives; partners with exposure dates greater than one year.

If patient is a spouse we will follow exposure ten years back.

**Method(s) of transmitting confidential patient data:** Call, fax

**Return of disposition/time frame:** One month

#### Gonorrhea/Chlamydia Partner Services and Incoming Morbidity

**Point of Contact:** Valerie Ellis

**Email:** [Valerie.Ellis@flhealth.gov](mailto:Valerie.Ellis@flhealth.gov)

**Phone:** 850-245-4325 or (850) 553-0289

**Fax:** 850-412-2204

#### All Positive Outgoing Morbidity Reports for GC/CT

**Point of Contact:** LaShunda "Dali" Williams

**Email:** [LaShunda.Williams@flhealth.gov](mailto:LaShunda.Williams@flhealth.gov)

**Phone:** (850) 756-1310 or (850) 901-6607

**Fax:** 850-412-2204

**Method(s) of transmitting confidential patient data:** Fax or mail

## GEORGIA

Georgia Department of Public Health/STD Office

2 Peachtree Street NW 13th Floor

Atlanta, GA 30303

Main Fax: 404-657-3133

**Hours of Operation:** 8:30am – 6:30pm EST

### Syphilis Record Searches

**Point of Contact:** Tinya Johnson

**Email:** Tinya.Johnson@dph.ga.gov

**Phone:** 404-232-1749

**Fax:** 404-657-3133

**Record Searches:** All syphilis

### Syphilis/HIV

**Point of Contact:** Sonji Casterlow

**Email:** Sonji.Casterlow@dph.ga.gov

**Phone:** 404-657-2594

**Fax:** 404-657-3133

**Syphilis reactors accepted and followed:**

All syphilis reactors under age of 50 with less than one year from date of specimen

Anyone over 50 must have titer of 1:16 or greater

**Syphilis contacts accepted and followed:** All with less than one year exposure to early syphilis case

**Method(s) of transmitting confidential patient data:** phone or fax

**Return of disposition/time frame:** Fourteen (14) days for contacts.

**HIV cases/contacts accepted and followed:** Less than one year from date of specimen or last exposure; spouse – up to ten years.

**Method(s) of transmitting confidential patient data:** fax and mail (actual lab report is needed for initiation for all positive reactors).

**Return of disposition/time frame:** Fourteen (14) days for contacts.

**Back-Up Point of Contact:** Mildred Banks, STD Prevention Services Senior Manager

**Email:** Mildred.Banks@dph.ga.gov

**Phone:** 404-463-0812

**Fax:** 404-657-3133

Gonorrhea (GC) and Chlamydia (CT)

**GC cases accepted:** All

**Method(s) of transmitting confidential patient data:** fax and mail.

Morbidity only- no return disposition

## HAWAII

State of Hawaii Dept. of Health

STD / AIDS Prevention Branch

3627 Kilauea Ave Room 304

Honolulu, HI 96816

**Hours of Operation:** 8:00am – 4:00 pm HST (5 hours behind Eastern in winter; 6 in DST).

**\*\*We do not accept referrals of cases through email. Send copies of Field Records and confirming lab reports.**

### Syphilis

**Point of Contact:** Alan Komeya

**Email:** alan.komeya@doh.hawaii.gov

**Phone:** 808-733-9861

**Fax:** 808-733-9291

**Backup Point of Contact:** Katherine Sung

**Email:** katherine.sung@doh.hawaii.gov

**Phone:** 808-733-9863

**Fax:** 808-733-9291

**Syphilis stages/reactors accepted and followed:** All syphilis stages/reactors.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Two weeks update; will return disposition in one month.

### HIV

**Point of Contact:** Alexis Charpentier

**Email:** alexis.charpentier@doh.hawaii.gov

**Phone:** 808-733-4383

**Fax:** 808-733-9015

**Backup Point of Contact:** Kiana Fukunaga

**Email:** kiana.fukunaga@doh.hawaii.gov

**Phone:** 808-733-4072

**Fax:** 808-733-9015

**HIV cases followed:** All newly identified; prior infection; and co-infection with other STDs.

**Method(s) of transmitting confidential patient data:** Call or fax POC. Always send a copy of the Field/Interview Record.

**Return of disposition/time frame:** Two weeks

### Gonorrhea (GC)

**Point of Contact:** Same contact information as listed above for Syphilis

**GC cases/contacts accepted and followed:** All infected and untreated cases/contacts

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** We return Antibiotic-resistant or treatment failure GC.  
Weekly update with one month disposition.

### Chlamydia (CT)

**Point of Contact:** Same contact information as listed above for Syphilis

**CT cases/contacts accepted and followed:** All infected and untreated cases/contacts

**Method(s) of transmitting confidential patient data:** Send Field/Interview Record via postal mail.

**Return of disposition/time frame:** One month

## IDAHO

Idaho Department of Health and Welfare  
Epidemiology Section, Bureau of Communicable Disease Control  
450 W State Street, 4th Floor  
PO Box 83720  
Boise, ID 83720  
**Hours of Operation:** 8:00am – 5:00pm Mountain Standard Time

### Syphilis

**Point of Contact:** Luis Vela, MPH, Epidemiologist

**Email:** Luis.Vela@dhw.idaho.gov

**Phone:** 208-332-7213

**Fax:** 208-332-7307

**Secondary Point of Contact:** Cathy “CJ” Ayotte, Epidemiology Surveillance Specialist

**Email:** CJ.Ayotte@dhw.idaho.gov

**Phone:** 208-334-0646

**Fax:** 208-332-7307

**Syphilis stages/reactors accepted and followed:** All syphilis cases, contact tracing will be initiated for all contacts to early syphilis.

**Method(s) of transmitting confidential patient data:** You may fax (our fax is confidential), phone (voicemail is confidential), or mail POC.

**Return of disposition/time frame:** One month

### HIV

**Point of Contact:** Jared Bartschi, MHE, Epidemiologist

**Email:** Jared.Bartschi@dhw.idaho.gov

**Phone:** 208-334-5944

**Fax:** 208-332-7307

**Secondary Point of Contact:** CJ Ayotte  
(Same contact information as listed above)

**HIV cases/contacts followed:** All cases; contact tracing will be accepted for recently diagnosed HIV infection (past 12 months).

**Method(s) of transmitting confidential patient data:** Fax (our fax is confidential), phone (voicemail is confidential), or mail POC.

**Return of disposition/time frame:** One month



## Gonorrhea (GC)

**Point of Contact:** Luis Vela and CJ Ayotte  
(Same information as listed above).

**GC cases/contacts accepted and followed:** All GC cases accepted for reporting; contact tracing will be accepted but will be completed at the discretion of the local health department.

**Method(s) of transmitting confidential patient data:** You may call (leave message on voicemail confidential), or fax (confidential) or you may mail correspondence to our POC at the address listed above.

**Return of disposition/time frame:** One month

## Chlamydia (CT)

**Point of Contact:** Luis Vela and CJ Ayotte  
(Same contact information as listed above)

**CT cases/contacts accepted and followed:** All CT cases accepted for reporting; contact tracing will be accepted for LGV chlamydia.

**Method(s) of transmitting confidential patient data:** Same

**Return of disposition/time frame:** One month

## ILLINOIS

Excluding City of Chicago

Illinois Department of Public Health; STD Program

525 W. Jefferson St., Ground Floor

Springfield, IL. 62761

**Hours of Operation:** 8:30am – 5:00pm, Central Time

### Syphilis

**Point of Contact:** Margie Smith

**Email:** Marguerite.Smith@illinois.gov

**Phone:** 217-524-3919 Confidential

**Fax:** 217-524-5443 Confidential

**Secondary Point of Contact:** John Creviston

**Email:** John.Creviston@illinois.gov

**Phone:** 217-782-2747

**Fax:** 217-524-5443 Confidential

**Syphilis stages/reactors accepted and followed:** All reactors within jurisdiction.

**Method(s) of transmitting confidential patient data:** Use secure fax listed above.

**Return of disposition/time frame:** Yes, four weeks contacts to syphilis.

### Gonorrhea (GC)

**Point of Contact:** Lynette Mckinney-Colman

**Email:** Lynette.Mckinney-colman@Illinois.gov

**Phone:** 217-782-2747

**Fax:** 217-524-5443 Confidential

**GC cases/contacts accepted and followed:** Infected cases treated & untreated and contacts.

**Method(s) of transmitting confidential patient data:** Mail or fax to POC.

**Return of disposition/time frame:** Dispositions for contacts to GC are not reported.

### Chlamydia (CT)

**Point of Contact:** Lynette Mckinney-Colman (Contact information same as above.)

**CT cases/contacts accepted and followed:** Infected cases treated & untreated and contacts.

**Method(s) of transmitting confidential patient data:** Mail or fax POC.

**Return of disposition/time frame:** Dispositions for contacts to CT are not reported.

### HIV

**Primary Point of Contact:** Brittany Koonce

**Email:** Brittany.Koonce@illinois.gov

**Phone:** 217-557-9056

**Fax:** 217-557-3675 (secure fax)

**HIV cases/contacts followed:** All newly identified infections/contacts and prior HIV positive persons lost to Care case management.

**Method(s) of transmitting confidential patient data:** Contact HIV Counseling and Testing Section or fax correspondence.

**Return of disposition/time frame:** Dispositions to be returned no later than thirty days.

## INDIANA

Indiana Department of Health  
HIV/STD Division – STD Program  
2 N. Meridian Street 6C  
Indianapolis, IN 46204

**Hours of Operation:** 8:15 AM to 4 PM EST

### Syphilis

**Point of Contact:** Emily Fussell, STD Specialist & Camille Singh, STD Specialist

**Email:** Email: [efussell@isdh.in.gov](mailto:efussell@isdh.in.gov) [csingh@isdh.in.gov](mailto:csingh@isdh.in.gov)

**Phone:** 317-233-7005 or 317-401-8296

**Fax:** 317-234-0144

**Confidential REDCap Survey:** <https://redcap.isdh.in.gov/surveys/?s=39P4JW9DFC>\*

*\*If your locality is authorized to use the REDCap survey function, please use the following tips for a successful entry:*

- *Please select "OOS" as the district*
- *Please put "999" for "NBS Patient ID"*  
*Please select "historical information" for a record search request*
- *Please enter P-, A-, or S- referral basis and disease code in comment section if a partner, associate, or social contact*

**Syphilis stages/reactors accepted and followed:** All confirmed/probable cases of Primary, Secondary, Early NP-NS, and Late/Unknown Duration. All partners to Primary, Secondary, and Early NP-NS. Partners to Late or Unknown Duration only if OP's titer is 1:64 or greater or the partner is known to be pregnant (regardless of OP's titer)

**Preferred Method(s) of transmitting confidential patient data:** Fax or call POC.

**Return Disposition/time frame:** Thirty (30) days

### HIV

**Point of Contact:** Reina Valdez, NBS Specialist

**Email:** [RValdez@isdh.in.gov](mailto:RValdez@isdh.in.gov)

**Phone:** 317-232-0458

**Fax:** 317-234-0144

**Confidential REDCap Survey:** <https://redcap.isdh.in.gov/surveys/?s=39P4JW9DFC>\*

*\*If your locality is authorized to use the REDCap survey function, please use the following tips for a successful entry:*

- *Please select "OOS" as the district*
- *Please put "999" for "NBS Patient ID"*  
*Please select "historical information" for a record search request*

- *Please enter P-, A-, or S- referral basis and disease code in comment section if a partner, associate, or social contact*

**Preferred Method(s) of transmitting confidential patient data:** Fax or call POC.

**HIV cases/contacts followed:** All new HIV/AIDS diagnoses who have not been identified as positive/have positive testing within the last 5 years. All partners to HIV/AIDS whose exposures occur within the last 12 months.

**Return of disposition/timeframe:** Thirty (30) days

## Gonorrhea

**Point of Contact:** Emily Fussell, STD Specialist & Camille Singh, STD Specialist

**Email:** Email: [efussell@isdh.in.gov](mailto:efussell@isdh.in.gov) [csingh@isdh.in.gov](mailto:csingh@isdh.in.gov)

**Phone:** 317-233-7005 or 317-401-8296

**Fax:** 317-234-0144

**Confidential REDCap Survey:** [https://redcap.isdh.in.gov/surveys/?s=39P4JW9DFC\\*](https://redcap.isdh.in.gov/surveys/?s=39P4JW9DFC*)

*\*If your locality is authorized to use the REDCap survey function, please use the following tips for a successful entry:*

- *Please select "OOS" as the district*
- *Please put "999" for "NBS Patient ID"*  
*Please select "historical information" for a record search request*
- *Please enter P-, A-, or S- referral basis and disease code in comment section if a partner, associate, or social contact*

**Preferred Method(s) of transmitting confidential patient data:** Fax or call POC.

**GC cases/contacts accepted and followed:** All confirmed cases of gonorrhea. Partners who have been exposed within the last 60 days and are: 25 years of age and younger or pregnant (regardless of age).

**Return of disposition/timeframe:** Thirty (30) days

## Chlamydia

**Point of Contact:** Emily Fussell, STD Specialist & Camille Singh, STD Specialist

**Email:** Email: [efussell@isdh.in.gov](mailto:efussell@isdh.in.gov) [csingh@isdh.in.gov](mailto:csingh@isdh.in.gov)

**Phone:** 317-233-7005 or 317-401-8296

**Fax:** 317-234-0144

**Preferred Method(s) of transmitting confidential patient data:** Fax or call POC.

**CT cases/contacts accepted and followed:** All confirmed cases of chlamydia. Indiana does not accept any chlamydia monoinfection for partner follow-up. Partner must be exposed to chlamydia and another disease within the last 60 days.

**Return of disposition/timeframe:** Thirty (30) days

**Alternate POC for all infections:** Olivia Ridgeway, Operations Manager

**Email:** [oridgeway@isdh.in.gov](mailto:oridgeway@isdh.in.gov)

**Phone:** 317-233-7418

**Fax:** 317-234-0144

**Preferred Method(s) of transmitting confidential patient data:** Fax or call alternate POC

## IOWA

Iowa Department of Public Health  
Bureau of HIV, STD, and Hepatitis (Code #00)  
321 E. 12th Street  
Des Moines, IA 50319-0075  
**Hours of Operations:** 8:00am – 4:00pm, CST

### Syphilis

**Point of Contact:** Katy Cremer  
**Email:** kathryn.cremer@idph.iowa.gov  
**Phone:** 515-281-3031 (confidential line); FX: 515-725-1278 (confidential)

**Backup Point of Contact:** Jo Mostrom  
**Email:** Joanne.Mostrom@idph.iowa.gov  
**Phone:** 515-281-7709 (confidential line); FX: 515-725-1278 (confidential)

**Syphilis stages/reactors accepted and followed:** All syphilis stages/reactors; named partners to primary, secondary, and early latent cases.

**Method(s) of transmitting confidential patient data:** Fax field record (including all available demographic, exposure, medical/treatment, and locating information available) and lab results.

**Return of disposition/time frame:** Four weeks from notification, upon request.

### HIV

**Point of Contact:** Jo Mostrom (Same contact information as listed above)

**Backup Point of Contact:** Katy Cremer (Same contact information as listed above)

**HIV cases/contacts followed:** All newly identified infections and named partners.

**Method(s) of transmitting confidential patient data:** Fax field record (including all available demographic, exposure, medical/treatment, and locating information available) and lab results.

**Return of disposition/time frame:** Four weeks from notification, upon request.

### Gonorrhea (GC)

**Point of Contact:** Katy Cremer (Same contact information as listed above)

**Backup Point of Contact:** Jo Mostrom (Same contact information as listed above)

**GC cases/contacts accepted and followed:** All cases and named partners

**Method(s) of transmitting confidential patient data:** Fax field record (including all available demographic, exposure, medical/treatment, and locating information available) and lab results.

**Return of disposition/time frame:** No

## Chlamydia (CT)

**Point of Contact:** Katy Cremer (Same contact information as listed above)

**Backup Point of Contact:** Jo Mostrom (Same contact information as listed above)

**CT cases/contacts accepted and followed:** CT cases only.

**Method(s) of transmitting confidential patient data:** Fax field record (including all available demographic, medical/treatment, and locating information available) and lab results.

**Return of disposition/time frame:** No

**STD Program Manager:** George Walton

**Email:** George.Walton@idph.iowa.gov

**Phone:** 515-281-4936 (confidential line)

**Fax:** 515-725-1278 (confidential)



## KANSAS

Kansas Department of Health & Environment  
1000 SW Jackson, Ste. 210  
Topeka, KS 66612

**Hours of Operation:** 7:00 a.m. – 3:30 p.m. CST.

### Syphilis:

**Point of Contact:** Amy Rickenbaker

**Email:** Amy.Rickenbaker@ks.gov

**Phone:** 785-296-5596

**Fax:** 785-559-4225

**Backup Point of Contact:** Grace Sirois

**Email:** [Grace.Sirois@ks.gov](mailto:Grace.Sirois@ks.gov)

**Phone:** 785-296-5597

**Fax:** 785-559-4225

**Backup Point of Contact:** Kristen Row

**Email:** Kristen.row@ks.gov

**Phone:** 785-296-5651

**Syphilis Stages/Reactors accepted and followed:** All reactors, contacts for Primary, secondary, and early latent

**Method(s) of transmitting confidential patient data:** Call or Fax POC.

**Return of disposition/time frame:** One month

### HIV:

**Point of Contact for exposed sex partners only:** Amy Rickenbaker (Same as above).

**Backup Point of Contact:** (Same contact information as listed above).

**Point of Contact for New HIV Cases:** Kristen Row

**Email:** Kristen.row@ks.gov

**Phone:** 785-296-5651

**Backup Point of Contact:** Grace Sirois (same information as above)

**HIV cases/contacts followed:** All Contacts and All newly identified infections.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** One month

Gonorrhea (GC):

**Point of Contact:** Amy Rickenbaker (Same contact information as listed above)

**GC cases/contacts accepted and followed:** Only infected cases

**Method of transmitting confidential data:** Fax completed Field Record to 785-559-4225

**Return of disposition/time frame:** No dispositions provided

Chlamydia (CT):

**Point of Contact:** Amy Rickenbaker (Same contact information as listed above)

**GC cases/contacts accepted and followed:** Only infected cases

**Method of transmitting confidential data:** Fax completed Field Record to 785-559-4225

**Return of disposition/time frame:** No dispositions provided

## KENTUCKY

STD Control Program

275 East Main Street

MS: HS2CC

Frankfort, KY 40321

**Hours of Operation:** 8:00am to 4:30pm Eastern Time.

### Syphilis

**Primary Point of Contact:** Sheri White

**Phone:** 502 564-4804 ex 4301

**Email:** Sheri.White@ky.gov

**Secondary Point of Contact:** Chang Lee

**Phone:** 502 564-4804 ex 4300

**Email:** Chang.Lee@ky.gov

**Syphilis stages/reactors accepted and followed:** All Primary, Secondary and Early Latent reactors and all partners to Primary, Secondary and Early Latent cases within appropriate exposure period.

**Method(s) of transmitting confidential patient data:** Call Primary POC or Secondary POC.

**Return of disposition/time frame:** Two weeks

### HIV

**Point of Contact:** Same contact information as listed above.

**HIV cases/contacts followed:** All newly identified cases, co-infected cases, and any previous positive with a current diagnosis of syphilis.

**Method(s) of transmitting confidential patient data:** (Same contact information as listed above).

**Return of disposition/time frame:** One month

### Gonorrhea (GC)

**Point of Contact:** Same contact information as listed above.

**GC cases/contacts accepted and followed:** Only infected & untreated in select areas, no partners, except in case of pregnant partner.

**Method(s) of transmitting confidential patient data:** (Same contact information as listed above).

**Return of disposition/time frame:** None

## Chlamydia (CT)

**Point of Contact:** Same contact information as listed above.

**CT cases/contacts accepted and followed:** Only infected & untreated in select areas, no partners, except in case of pregnant partner).

**Method(s) of transmitting confidential patient data:** (Same contact information as listed above).

**Return of disposition/time frame:** None

## LOS ANGELES

Los Angeles County Department of Public Health, Division of HIV and STD Programs  
600 S. Commonwealth Ave. Fl 10, Suite 1280  
Los Angeles, CA 90005

**Hours of Operation:** 7:00am – 3:30pm. PST

### Syphilis

**Point of Contact:** Tracy Smith

**Backup Point of Contact:** Jacqueline Battle

**Email:** ICCR@ph.lacounty.gov

**Phone:** (213) 639-4379

**Fax:** (213) 741-9245 (both lines are confidential).

**Syphilis stages/reactors accepted and followed:** Positive syphilis labs, partners to primary, secondary, and early latent.

**Method(s) of transmitting confidential patient data:** Phone or fax POC.

**Return of disposition/time frame:** Yes, two weeks.

### HIV

**Point of Contact:** Tracy Smith (Same contact information as listed above)

**Backup Point of Contact:** Jacqueline Battle

**HIV cases/contacts followed:** Newly identified infections; prior infections and co-infections.

**Method(s) of transmitting confidential patient data:** Phone or fax POC. (both lines confidential).

**Return of disposition/time frame:** Yes, thirty days.

### Gonorrhea

**Point of Contact:** Tracy Smith (Same contact information as listed above)

**Backup Point of Contact:** Patricia Barnett

**GC cases/contacts accepted and followed:** Will receive positive GC cases not treated; contacts should be securely mailed.

**Method of transmitting confidential patient data:** Call or fax POC (both lines are confidential)

**Return of disposition/time frame:** Yes, two weeks

### Chlamydia

**Point of Contact:** Tracy Smith (Same contact information as listed above)

**Backup Point of Contact:** Patricia Barnett

**CT cases/contacts accepted and followed:** Positive CT cases not treated; Contacts can be mailed.

**Method of transmitting confidential patient data:** Call or fax POC (both lines are confidential)  
**Return of disposition/time frame:** Yes, two weeks

## LOUISIANA

Louisiana Department of Health

STD/HIV Program

1450 Poydras St. Suite 2136

New Orleans, La. 70112

**Hours of Operation:** 8:00 a.m. to 4:00 p.m. CST Monday-Friday

### Syphilis

**Point of Contact:** Denise Robertson, Louisiana STD/HIV Program OOJ Coordinator

**Phone:** 504-556-9841

**Email:** Denise.Robertson@La.gov (Direct)

**Fax:** 504-568-8384

**Backup Point of Contact:** Javone Davis-Charles

**Phone:** 504-568-5390

**Fax:** 504-568-8384

**Email:** Javone.Davis@La.gov.

**Syphilis stages/reactors accepted and followed:** All Reactors are under age 60 are accepted.

All untreated PREGNANT females regardless of age, titer or diagnosis.

All primary, secondary, and early latent needing treatment and/or interview.

All partners exposed to primary, secondary and early syphilis cases.

**Method(s) of transmitting confidential patient data:** Phone POC or use confidential fax line:

504-568-8384

**Mailing Address:** STD/HIV Program, Attention: ICCR Coordinator

1450 Poydras St. Suite 2136

New Orleans, La. 70112

\*\* Please double envelope when mailing. \*\*

Return of disposition/time frame: Yes/Disposition due date is two weeks from date of receipt.

### HIV (Partner Services)

**Point of Contact:** Denise Robertson (Same contact information as listed above).

**HIV contacts followed:** Partners to newly identified infections in the last twelve months.

**Method(s) of transmitting confidential patient data:**

Phone call POC or use confidential fax line: 504-568-8384

Mailing Address: STD/HIV Program ICCR Coordinator: (same address as listed above)

\*\* Please double envelope when mailing. \*\*

Return of disposition/time frame: Yes/ Disposition due date is four weeks from date of receipt.

## Gonorrhea

**Point of Contact:** Denise Robertson (Same contact information as listed above).

**GC cases/contacts accepted and followed:** PREGNANT females (i.e. untreated or partners), and persons thirteen years of age or under with a positive test.

**Method(s) of transmitting confidential patient data:** (Same contact information as listed above).

**Return of disposition/time frame:** Yes/ Disposition due date is four weeks from date of receipt.

## Chlamydia

**Point of Contact:** Denise Robertson (Same contact information as listed above).

**CT cases/contacts accepted and followed:** PREGNANT females (i.e. contacts, infected and untreated), persons thirteen years of age or under with a positive test.

**Method(s) of transmitting confidential patient data:** (Same contact information as listed above).

**Return of disposition/time frame:** Yes/ Disposition due date is four weeks from date of receipt.



## MAINE

Maine Dept. of Health

HIV / STD / Viral Hepatitis

286 Water St 9th Floor

Augusta, ME 04333

**Hours of Operation:** 8:00 am – 5:00 EST

**Point of Contact:** Brenda Kendall

**Phone:** 207-287-6653

**Fax:** 207-287-3498

**Email:** Brenda.Kendall@maine.gov

### Syphilis:

Stages/reactors accepted. All P&S, EL cases, all P&S, EL partners, all reactors.

**Method(s) of transmitting confidential patient data:** Contact via Fax: 207-287-3498

Return of disposition/time frame: Yes, two weeks

### HIV:

**HIV cases/contacts followed:** All newly identified HIV infections (within one year of diagnosis), and all partners to HIV.

**Method(s) of transmitting confidential patient data:** Contact via Fax: 207-287-3498.

Return of disposition/time frame: Yes, thirty days

### Gonorrhea (GC):

**Cases/contacts accepted and followed:** Partners to GC and any infected GC cases.

**Method(s) of transmitting confidential patient data:** Contact via Fax: 207-287-3498

Return of disposition/time frame: Yes, two weeks

### Chlamydia:

**CT cases/contacts accepted and followed:** Partners to CT, infected and untreated CT cases.

**Method(s) of transmitting confidential patient data:** Contact via Fax: 207-287-3498

## MARYLAND

Maryland Department of Health  
Center for STI Prevention, Surveillance Unit  
500 N. Calvert Street, 5th Floor  
Baltimore, MD 21202

**Main Fax:** 410-333-5529

**Alternate Fax:** 410-528-6098

**Main Phone:** 410-767-6690

**Surveillance Manager:** 410-767-0859

**Hours of Operation:** 8:30am – 5:00pm M-F

**Point of Contact:** Jasmine Talley

**Phone:** 410-767-6705

**Email:** jasmine.talley@maryland.gov

**Point of Contact:** Patricia Marder

**Phone:** 410-767-5071

**Email:** patricia.marder@maryland.gov

**Method of Contact:** Confidential phone, fax or mail

### REACTORS AND CASE REPORTS:

All reactive tests and case reports for MD residents will be accepted and investigated based on local protocol. Dispositions will **NOT** be provided.

### CONTACTS:

MD residents that are OOJ contacts must include:

- minimum patient location information (name, age or DOB, and address and/or phone number) **AND**
- exposure dates (FSE and LSE)

OOJ contacts with the required info (listed above) will be accepted based on the following criteria:

Disease	Accepted and investigated	Dispo Returned
Syphilis	<ul style="list-style-type: none"><li>• Contacts to ALL Early Syphilis with exposure dates &lt; 12 months</li></ul>	14 days
HIV	<ul style="list-style-type: none"><li>• Contacts to HIV with exposure dates &lt; 12 months</li></ul>	30 days

	<ul style="list-style-type: none"> <li>• Contacts to HIV with a co-infection of Syphilis, GC and/or CT with exposure dates &lt; 12 months</li> </ul>	
Gonorrhea (GC) & Chlamydia (CT)	<ul style="list-style-type: none"> <li>• Female contacts (of any age) that are known to be pregnant, regardless of exposure date</li> <li>• Contacts 18 years old or younger with exposure dates &lt; 60 days</li> <li>• ALL Contacts to GC with reduced susceptibility to antibiotics to azithromycin, ceftriaxone or cefixime, regardless of exposure date</li> </ul>	30 days

**Note: Internet Partners (IPS) – contacts are accepted for early syphilis, HIV, and any co-infected HIV/STI exposures only.**

# MASSACHUSETTS

Massachusetts Department of Health  
State Laboratory Institute  
Bureau of Infectious Disease  
STD Prevention Division  
305 South St  
Jamaica Plain, MA 02130-3597  
**Hours of Operation:** 9:00am – 4:00pm EST

## Syphilis

**Point of Contact:** Record search and morbidity – Anne Federico

**Email:** [Anne.Federico@state.ma.us](mailto:Anne.Federico@state.ma.us) (Please note, we cannot receive confidential information via email)

**Phone:** 617-983-6950 **Work Cell:** 781-675-0611

**Syphilis stages/reactors accepted and followed:** All P & S, EL. All reactors under 55 y.o.

**Method(s) of transmitting confidential patient data:**

Call POC or confidential E-Fax 617-887-8790

**Return of disposition/time frame:** Yes, two weeks.

## HIV

**HIV – Contacts Only** (see below for morbidity and record searches)

**Point of Contact:** Anne Federico

**Email:** [Anne.Federico@state.ma.us](mailto:Anne.Federico@state.ma.us) (Please note, we cannot receive confidential information via email)

**Phone:** 617-983-6950 **Work Cell:** 781-675-0611

**HIV contacts followed:** All partners to HIV

**Method(s) of transmitting confidential patient data:**

Call POC or confidential E-Fax 617-887-8790

**Return of disposition/time frame:** Yes, two weeks

## **HIV – Morbidity and Record Searches**

**Point of Contact:** Maria Barros

**Phone:** 617-983-6572

**Method(s) of transmitting confidential patient data:**

Call POC or confidential E-Fax 617-887-8790

**Return of disposition/time frame:** Yes, two weeks

## Gonorrhea – (Record search & morbidity)

**Point of Contact:** Anne Federico (Same contact information as listed above)

**GC cases/contacts accepted and followed:** Untreated GC positive pregnant individuals and cases and contacts with cephalosporin resistant GC will be accepted and followed. Record search, and morbidity.

**Method(s) of transmitting confidential patient data:** (Same as contact information listed above).

**Return of disposition/time frame:** Yes, two weeks.

## Chlamydia

**CT cases/contacts accepted and followed:** Only untreated pregnant individuals, record search, and morbidity

**Method(s) of transmitting confidential patient data:** Anne Federico (Same as contact information listed above).

**Return of disposition/time frame:** Yes, two weeks.

**Backup Point of Contact for Syphilis, HIV, GC, and CT:** Lauren Molotnikov

**Email:** [lauren.molotnikov@state.ma.us](mailto:lauren.molotnikov@state.ma.us) (Please note, we cannot receive confidential information via email)

**Phone:** 617-983-6598 **Work Cell:** 857-263-0575

**Confidential E-Fax** 617-887-8790

## MICHIGAN

Michigan Department of Health and Human Services  
Bureau of Health and Wellness  
Division of HIV and STI Programs  
STI Section  
P.O. BOX 30727  
Lansing, MI 48913

**Hours of Operation:** 8:00am – 5:00pm, EST

### Syphilis

**Point of Contact:** Theresa Yarbrough

**Email:** yarbrought@michigan.gov

**Phone:** 313-446-8955 (direct); 313-456-1586 (main line)

**Fax:** 313-456-1580

**Point of Contact:** Lindsey Baldwin

**Email:** BaldwinL4@michigan.gov

**Phone:** 313-348-6564 (direct); 313-456-1572 (office)

**Fax:** 313-456-1580

**Syphilis stages/reactors accepted and followed:** P&S, EL, reactors 1:1 or higher up to 50 y.o., 1:4 or higher up to 59 y.o., 1:32 or higher up to 70 y.o.

**Method(s) of transmitting patient data:** Call POC or via secured fax – (313) 456-1580 during hours of operations.

**Return of disposition/time frame:** Fourteen days

### HIV

**Point of Contact:** Theresa Yarbrough

**Email:** yarbrought@michigan.gov

**Phone:** 313-446-8955 (direct); 313-456-1586 (main line)

**Fax:** 313-456-1580

**HIV cases/contacts followed:** Newly diagnosed infection reports to local health. Partners are initiated for investigation.

**Method(s) of transmitting patient data:** Call POC or contact fax secure line (313) 456-1580.

**Return of disposition/time frame:** Thirty days – partners only

## Gonorrhea

**Point of Contact:** Theresa Yarbrough (Same contact information as listed above).

**GC cases/contacts accepted and followed:** Only infected and untreated cases are accepted. Forward reports to local health department. Record searches will not be performed for GC.

**Method(s) of transmitting patient data:** Call POC or contact secured fax – (313) 456-1580.

Return of disposition/time frame: No

**Point of Contact:** Lindsey Baldwin

**Email:** BaldwinL4@michigan.gov

**Phone:** 313-348-6564 (direct); 313-456-1572 (office)

**Fax:** 313-456-1580

## Chlamydia (CT)

**Point of Contact:** Theresa Yarbrough (Same contact information as listed for GC).

**CT cases/contacts accepted and followed:** Only infected and untreated cases are accepted. Forward reports to local health department. Record searches will not be performed for CT.

**Method(s) of transmitting patient data:** Phone call POC or contact secured fax – (313) 456-1580.

**Point of Contact:** Lindsey Baldwin

**Email:** BaldwinL4@michigan.gov

**Phone:** 313-348-6564 (direct); 313-456-1572 (office)

**Fax:** 313-456-1580

## MINNESOTA

Minnesota Department of Health STD/HIV/TB Section

PO Box 64975

St. Paul, MN 55164-0975

**Hours of Operation:** 8:00 am – 4:00 pm, CST

### Syphilis – (Positive test result, reactors, record searches and case reports)

**Point of Contact:** Cynthia Lind-Livingston

**Phone:** 651-201-4024 (Office)

**Fax:** 651-201-4040

**Email:** Cindy.Lind@state.mn.us

**Point of Contact:** Christine Peel

**Phone:** 651-201-4037 (Office)

**Fax:** 651-201-4040

christine.peel@state.mn.us

**Point of Contact:** Gabrielle Morgenstern

**Phone:** 651-201-3568 (Office)

**Fax:** 651-201-4040

**Email:** Gabrielle.Morgenstern@state.mn.us

### Syphilis – (Contact/Partner/OOJ)

**Point of Contact:** Niles Schwartz

**Phone:** 651-201-5270 (Office)

**Fax:** 651-201-4040

**Email:** Niles.schwartz@state.mn.us

**Syphilis stages accepted and followed:** All primary, secondary and early latent; partners to early syphilis with traditional and/or Internet locating information.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Four weeks from date of receipt.

### HIV – (Positive test result, record searches and case reports)

**Point of Contact:** Sue Bedard-Johnson

**Phone:** 651-201-4006 (Office)

**Fax:** 651-201-4040

**Email:** Sue.Bedard-Johnson@state.mn.us

**Point of Contact:** Gabrielle Morgenstern

**Phone:** 651-201-3568 (Office)



**Fax:** 651-797-1972

**Email:** Gabrielle.Morgenstern@state.mn.us

**Point of Contact:** Adrianna Sonnek

**Phone:** 651-201-4043 (Office)

**Fax:** 651-201-4040

**Email:** adrianna.sonnek@state.mn.us

#### HIV – (Contact/Partner/OOJ)

**Point of Contact:** Niles Schwartz (Same contact information as listed above).

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**HIV cases/contacts accepted and followed:** All newly identified infections; prior infections with a current STD; partner with traditional and/or Internet locating information.

**Return of disposition/time frame:** Four weeks from date of receipt.

#### Gonorrhea (GC)

**Point of Contact:** Christine Peel (Same contact information as listed above).

**GC cases accepted and followed:** Only infected.

**Method(s) of transmitting confidential patient data:** (Same contact information as list above).

**Return of disposition/time frame:** Return disposition will not be provided unless requested by initiating agency.

#### Chlamydia (CT)

**Point of Contact:** Christine Peel (Same contact information as listed above).

**CT cases accepted and followed:** Only infected.

**Method(s) of transmitting confidential patient data:** (Same contact information as list above).

**Return of disposition/time frame:** Return disposition will not be provided unless requested by initiating agency.

## MISSISSIPPI

STD/HIV Program

Kendra Johnson (Office Director)

Mississippi State Department of Health

570 East Woodrow Wilson

P. O. Box 1700

Jackson, MS 39215

**Phone:** 601-576-7723

**Fax:** 601-576-7909

Christie Lewis, Epidemiologist

STD Surveillance Director

Mecole Roberson

Supervisor

**Hours of Operation:** Monday – Friday 8:00am 5:00pm

### Syphilis

**Point of Contact:** Lorenzo Madison

**Email:** lorenzo.madison@msdh.ms.gov

**Phone:** 601-576-7723

**Fax:** 601-576-7909

**Secondary Point of Contact:** Casondra Neal

**Email:** casondra.neal@msdh.ms.gov

**Phone:** 601-576-7723

**Fax:** 601-576-7909

**Third Point of Contact:** Chauncey Paige

**Email:** chauncey.berry@msdh.ms.gov

**Phone:** 601-576-7723

**Fax:** 601-576-7909

Syphilis stages/reactors accepted and followed: All reactors; syphilis stages, primary, secondary, and early latent; and contacts. Syphilis reactors will be accepted on all individuals with Mississippi residence and determined if follow-up is needed based on reactor and treatment history and age.

Method(s) of transmitting confidential patient data: Call POC, send secure fax, or send US Mail marked confidential c/o Surveillance, MSDH STD/HIV Office, 570 East Woodrow Wilson Ave. #350, Jackson, MS. 39216

Return of disposition/time frame: Thirty days.

## HIV

**Point of Contact:** Lorenzo Madison

**Email:** lorenzo.madison@msdh.ms.gov

**Phone:** 601-576-7723

**Fax:** 601-576-7909

**Secondary Point of Contact:** Casondra Neal

**Email:** casondra.neal@msdh.ms.gov

**Phone:** 601-576-7723

**Fax:** 601-576-7909

**Third Point of Contact:** Chauncey Paige

**Email:** chauncey.berry@msdh.ms.gov

**Phone:** 601-576-7723

**Fax:** 601-576-7909

### **HIV cases/contacts followed: Please include the following information:**

Full name, phone number, physical locating information and complete physical description; Partial name, or nickname, complete physical description and locating information including phone number, address, or place of employment; and Unknown name, complete physical description, locating information (no phone numbers), providing complete documentation of sources of locating information (from original patient, internet record search, PIMS, jail, or health department record searches, etc.)

**Method(s) of transmitting confidential patient data:** Call POC, send secure fax, or send US Postal Mail marked confidential Call POC, send secure fax, or send US Mail marked confidential c/o Surveillance, MSDH STD/HIV Office, 570 East Woodrow Wilson Ave. #350, Jackson, MS. 39216.

**Return of disposition/time frame:** Thirty days

## Gonorrhea (GC)

**NO POINT OF CONTACT:** No partner services performed. Follow protocol for MSDH reportable conditions. MSDH only follows positive GC cases residing in MS to confirm treatment.

To obtain protocol for reportable conditions, call 601-576-7723 or visit Reportable Diseases – Mississippi State Department of Health. Weekends, holidays and after 5pm: 601-576-7400

## Chlamydia (CT)

**NO POINT OF CONTACT:** No partner services performed. Follow protocol for MSDH reportable conditions. MSDH only follows positive CT cases residing in MS to confirm treatment.

To obtain protocol for reportable conditions, call 601-576-7723 or visit Reportable Diseases – Mississippi State Department of Health. Weekends, holidays and after 5pm: 601-576-7400



## MISSOURI

Missouri Dept. of Health & Senior Services  
Bureau of Reportable Disease Informatics  
Bureau of HIV/STD/Hepatitis  
PO Box 570  
Jefferson City, MO 65102-0570

**Hours of Operation:** 8:00 am – 5:00 pm CST

### Syphilis

**Point of Contact:** Debbie Malone  
**Email:** [Debbie.Malone@health.mo.gov](mailto:Debbie.Malone@health.mo.gov)  
**Phone:** 573-751-6142  
**Fax:** 573-751-6417 (confidential fax line).

**Point of Contact:** LeighAnn Fouts  
**Email:** [LeighAnn.Fouts@health.mo.gov](mailto:LeighAnn.Fouts@health.mo.gov)  
**Phone:** 573-751-6205  
**Fax:** 573-751-6417 (confidential fax line)

**Point of Contact:** Rose Kowieski  
**Email:** [Rose.Kowieski@health.mo.gov](mailto:Rose.Kowieski@health.mo.gov)  
**Phone:** 573-526-0509  
**Fax:** 573-751-6417 (confidential fax line)

**Syphilis stages/reactors accepted and followed:** All reactors, partners/social contacts to all stages

**Method(s) of transmitting confidential patient data:** Call POC or fax.

Return of disposition/time frame: Yes, two weeks

### HIV

**Point of Contact:** Debbie Malone, Rose, and LeighAnn Fouts (Same as above).  
**HIV cases/contacts followed:** All newly identified cases and all partners/social contacts  
**Method(s) of transmitting confidential patient data:** Call or fax POC.  
Return of disposition/time frame: Yes—One month

### Gonorrhea (GC)

**Point of Contact:** Debbie Malone, Rose, and LeighAnn Fouts (Same as above).  
**GC cases/contacts accepted and followed:** New cases needing treatment and partners.  
**Method(s) of transmitting confidential patient data:** Mail or fax POC.  
Return of disposition/time frame: Return dispositions will not be provided unless requested

## Chlamydia (CT)

**Point of Contact:** Debbie Malone, Rose, and LeighAnn Fouts (Same as above).

**CT cases/contacts accepted and followed:** New cases needing treatment and partners.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Return dispositions will not be provided unless requested.

## MONTANA

Montana Department of Health

1400 Broadway, Room C-211

Helena, MT 59620

**Hours of Operation:** Monday – Friday, 8:00 a.m. – 5:00 p.m. MST;

### Syphilis

**Point of Contact:** Cara Murolo

**Email:** [cmurolo@mt.gov](mailto:cmurolo@mt.gov)

**Phone:** 406-444-2678

**Fax:** 800-616-7460 (confidential)

**Syphilis stages/reactors accepted and followed:** All P & S/EL; all reactors; all contacts.

**Method(s) of transmitting confidential patient data:** Call POC or via fax

**Return of disposition/time frame:** Yes, two weeks

### HIV

**Point of Contact:** Jim Aspevig

**Email:** [james.aspevig@mt.gov](mailto:james.aspevig@mt.gov)

**Phone:** 406-444-1604

**HIV cases/contacts followed:** All newly identified cases: All named sexual/IDU partners

**Method(s) of transmitting confidential patient data:** (Same contact information as listed above).

**Return of disposition/time frame:** Yes-one month

### Gonorrhea

**Point of Contact:** Cara Murolo

**Email:** [cmurolo@mt.gov](mailto:cmurolo@mt.gov)

**Phone:** 406-444-2678

**GC cases/contacts accepted and followed:** All diagnosed cases of gonorrhea, and their contacts.

**Method(s) of transmitting confidential patient data:** (Same contact information as listed above).

**Return of disposition/time frame:** Yes, only if requested

### Chlamydia (CT)

**Point of Contact:** Cara Murolo (Same contact information as listed above).

**CT cases/contacts accepted and followed:** All diagnosed cases of chlamydia, and their contacts.

**Method(s) of transmitting confidential patient data:** (Same contact information as listed

above).

**Return of disposition/time frame:** Yes, only if requested



## NEBRASKA

Nebraska DHHS STD Prevention/Partner Services Program  
301 Centennial Mall South, 3rd Floor  
PO Box 95026  
Lincoln, NE 68509-5026

**Hours of Operation:** 8:00 a.m. – 5:00 p.m. CST

**Fax:** 402-471-1586

**E-Fax:** 402-742-8358

**\*\*\*ALL NEBRASKA Phone, Cell, FAX and/or E-Mail ARE CONFIDENTIAL\*\*\***

**Point of Contact:** Tami Washam, Nebraska STD Prevention & Surveillance and Partner Services Program Manager

**Phone:** 402-471-6459

**Cell:** 402-450-7937

**Fax:** 402-471-1586

**E-Fax:** 402-742-8358

**Email:** tami.washam@nebraska.gov

### Chlamydia (CT), Gonorrhea (GC), and Syphilis

**Point of Contact:** Laurie Laws, ICCR Clerk (please send 710-730 record searches and all OOJ)

**Phone:** 402.471.0137

**Email:** laurel.laws@nebraska.gov

Due to minimal staffing, our ability to follow-up has become limited. Priorities:

- Syphilis or HIV/AIDS patients and partners. (Any partners will need to have full names/screen names and current contact information.)
- Pregnant women, all untreated STDs.
- Record Searches returned for only Syphilis or HIV/AIDS.
- For Chlamydia or Gonorrhea, we are NOT currently doing record searches, treatment, or partner/contact information.
- Method(s) of transmitting confidential patient data: Call POC or send to either FAX number listed above.

### HIV

**Point of Contact:** Marci Athey-Graham, HIV Surveillance Program Manager

**Phone:** 402-471-2185

**Fax:** 402-471-1586

**Email:** marci.athey-graham@nebraska.gov

**HIV cases/contacts followed:** All newly identified infections; prior infections.

**Method(s) of transmitting confidential patient data:** Call POC or send confidential fax to same contact information as listed above.

**\*\*\* All HIV record searches or record requests should go directly through HIV Surveillance, Marci Athey-Graham, not the ICCR Clerk. \*\*\***

**Return of disposition/time frame:** Two weeks from notification, upon request

## NEVADA

ICCR Clerk & Sentinel Event Registrar  
Nevada Department of Health and Human Services

Division of Public and Behavioral Health | Office of Public Health Investigations & Epidemiology  
500 Damonte Ranch Parkway Ste. 657, Reno, NV 89521

ICCR Confidential Fax: 775-684-5999

### Syphilis Points of Contact

**Nevada Site:** Nevada Department of Health and Human Services

**Point of Contact:** Jenny Harbor

**Phone:** 775-684-5297

**Email:** jharbor@health.nv.gov

**Syphilis stages/reactors accepted and followed:** All P&S, EL/ all reactors, all ages

**Method(s) of transmitting confidential patient data:** FAX.

**Return of disposition/time frame:** Yes; within one month.

### HIV

**Nevada Site:** Nevada Department of Health and Human Services

**Point of Contact:** Caress Baltimore, MPH, CHES

**Phone:** 702-486-5665

**Email:** cbaltimore@health.nv.gov

**Point of Contact:** Preston Nguyen Tang, MPH

**Phone:** 702-486-6488

**Email:** ptang@health.nv.gov

**HIV Confidential Fax:** (702) 486-8101

**HIV cases/contacts followed:** All NV sites follow all new HIV cases, as well as newly arrived out-of-state HIV/AIDS cases.

**Method(s) of transmitting confidential patient data:** FAX.

**Return of disposition/time frame:** Yes; within one month.

### Gonorrhea (GC)

**Nevada Site:** Nevada Department of Health and Human Services

**Point of Contact:** Jenny Harbor

**Phone:** 775-684-5297

**Email:** jharbor@health.nv.gov

**GC cases/contacts accepted and followed:** NSHD, WCHD & CCHHS follow infected and untreated CT & GC cases. SNHD only follows CT & GC cases among JDC youth, pregnant females (aged < 34) and cluster/outbreak contacts.

**Method(s) of transmitting confidential patient data:** FAX.

**Return of disposition/time frame:** SNHD = N; NSHD, WCHD & CCHHS w/in 1 month.

### Chlamydia (CT)

**Nevada Site:** Nevada Department of Health and Human Services

**Point of Contact:** Jenny Harbor

**Phone:** 775-684-5297

**Email:** [jharbor@health.nv.gov](mailto:jharbor@health.nv.gov)

**CT cases/contacts accepted and followed:** NSHD, WCHD & CCHHS follow infected and untreated CT & GC cases. SNHD only follows CT & GC cases among JDC youth, pregnant females (aged < 34) and cluster/outbreak contacts.

**Method(s) of transmitting confidential patient data:** FAX.

**Return of disposition/time frame:** SNHD = N; NSHD, WCHD & CCHHS w/in 1 month.

## NEW HAMPSHIRE

Infectious Disease Prevention, Investigation & Care Services Section Bureau of Infectious  
Disease Control New Hampshire Division of Public Health Services,  
Department of Health and Human Services  
29 Hazen Drive  
Concord, NH 03301-6504

**Hours of Operations:** 8:30am – 4:00pm EST

### Syphilis

**Point of Contact:** Ann Goulbourne

**Email:** Ann.Goulbourne@dhhs.nh.gov

**Phone:** 603-271-7579

**Syphilis stages/reactors accepted and followed:** All accepted, only primary, secondary and early latent syphilis cases followed.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Two weeks

### HIV

**Point of Contact:** Hannah Bowen for record search & morbidity

**Email:** Hannah.Bowen@dhhs.nh.gov

**Phone:** 603-271-3932

**For partner follow-up:** Rachel Kusch

**Email:** rachel.kusch@dhhs.nh.gov

**Phone:** 603-271-6789

**HIV cases/contacts followed:** All accepted and followed.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Two weeks

### Gonorrhea (GC)

**POC for record search and morbidity:** Ann Goulbourne (Same contact information as above).

**GC cases/contacts accepted and followed:** All.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Two weeks

Chlamydia (CT)

**POC for record searches and morbidity:** Hannah Bowen (Same contact information as above).

**Phone:** 603-271-4490

**Email:** hannah.w.bowen@dhhs.nh.gov

CT cases accepted and followed. No follow-up on contacts.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** N/A

## NEW JERSEY

New Jersey Department of Health

P O Box 363

Trenton, NJ 08625-0363

**Hours of Operation:** 8:00am – 4:30pm, M-F EST

### Syphilis

**Point of Contact:** Sandra Snipes, ICCR Clerk

**Email:** sandra.snipes@doh.nj.gov

**Phone:** (D) 973-648-7351 ( C ) 609-955-8277 FX: 609-530-7982

**Second Point of Contact:** Alexis Dorsey, Public Health Representative I

**Email:** armedia.dorsey@doh.nj.gov

**Phone:** 609-462-1122

**Fax:** 609-530-7982

**Backup Point of Contact:** Steven Dunagan, Special Projects Coordinator

**Phone:** 609-433-2360 FX: 609-826-4870

**Email:** steven.dunagan@doh.nj.gov

**Syphilis stages/reactors accepted:** We accept all reactors. We follow reactors up to 49 yrs., with or w/o an RPR and our grid will determine follow-up on reactors with titers.

**We follow partners to:** primary, secondary, and early latent syphilis cases. We need descriptions, exposure dates, age, address with city and at least a working phone # if not a complete address.

**Method(s) of transmitting confidential patient data:** Reactors and partners can be faxed.

**Return of disposition/time frame:** Two weeks

### HIV

**Point of Contact:** Deborah Gleissner

**Email:** Deborah.gleissner@doh.nj.gov

**Phone:** 609-273-6575

**HIV cases/contacts followed:** New infections, prior infections with current STD...call for more information if needed.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Thirty days

Second Point of Contact: Sandra Snipes (Same as contact information as listed above).

## Gonorrhea (GC)

**Point of Contact:** Sandra Snipes (Same contact information as listed above).

**GC cases/contacts accepted:** All positive test reports for morbidity. We follow all pregnant females and cases under 14 yrs. We also follow pregnant contacts and any contact to designated resistant GC cases.

**Method(s) of transmitting confidential patient data:** Same contact information as listed above.

**Return of disposition/time frame:** Two weeks

## Chlamydia (CT)

**Point of Contact:** Sandra Snipes (Same contact information as listed above).

**CT cases accepted:** All positive test reports for morbidity. We follow cases under 14 yrs. and all pregnant females.

**Method(s) of transmitting confidential patient data:** Same contact information as listed above.

**Return of disposition/time frame:** Two weeks



## NEW MEXICO

Public Health Division  
Infectious Disease Bureau  
STD Prevention Program  
1190 St. Francis Dr. Suite S-11200  
Santa Fe, NM 87505

### Syphilis

**Point of Contact:** Lewis Smith

**Phone:** 505-476-3636

**Fax:** 505-476-3638

**Email:** LDS5@cdc.gov

**Point of Contact:** Margo Yee

**Phone:** 505-476-3611

**Fax:** 505-476-3638

**Email:** Margo.Yee@state.nm.us

Use the STD Program mailing address above for Lewis Smith or Margo Yee.

**Syphilis stages/reactors accepted and followed:** All Reactors for morbidity purposes. (Once a case is determined to be a late case, partner notification will not occur). Moreover, all cases that meet our reactor grid requirements are followed to include cases related contacts, suspects, and associates except for contacts to late syphilis.

**Method(s) of transmitting confidential patient data:** Preferred by fax; we also accept reports by phone or mail.

**Return of disposition/time frame:** One month.

### HIV (All case related contacts, suspects, and associates)

**Point of Contact:** Same POCs as syphilis for all case related contacts, social contacts, and associates. See the contacts below for HIV positive test results.

**HIV cases/contacts followed:** Case related contacts, suspects, and associates.

**Method(s) of transmitting confidential patient data:** Same as for syphilis.

**Return of disposition/time frame:** One month.

### HIV (New Mexico residents with positive HIV test results)

**Point of Contact:** Jeff Lauritsen, HIV Surveillance Coordinator

**Email:** jeff.lauritsen@state.nm.us

**Phone:** 505-476-3509

**Fax:** 505-476-3544

**HIV cases/contacts followed:** All New Mexico HIV cases are accepted and followed. Persons residing outside New Mexico who have contacts that reside in New Mexico should be referred to the Syphilis contact (see above).

**Method(s) of transmitting confidential patient data:** Call, Fax, or Mail.

**Return of disposition/time frame:** Not applicable

### Gonorrhea (GC)

**Point of Contact:** Same as syphilis.

**GC cases/contacts accepted and followed:** All.

**Method(s) of transmitting confidential patient data:** Same as for syphilis.

**Return of disposition/time frame:** Two weeks.

### Chlamydia (CT)

**Point of Contact:** Same as for syphilis.

**CT cases/contacts accepted and followed:** All reactive tests are accepted for morbidity purposes. Only known pregnant cases are followed for treatment verification and partner notification. Only contacts to known pregnant cases are followed.

**Method(s) of transmitting confidential patient data:** Same as for syphilis.

**Return of disposition/time frame:** Two weeks.

# NEW YORK CITY

New York City Department of Health and Mental Hygiene (NYC DOHMH)  
Bureau of Sexually Transmitted Infection (BSTI)  
Gotham Center  
Surveillance and Field Operations  
42-09 28<sup>th</sup> Street, 20<sup>th</sup> Floor  
Queens, NY 11101

**Main phone:** 347-396-7201

\*\*\* Due to COVID-19, this line is not being answered by a live person, BUT, will be accepting confidential voicemail messages. If you leave a message, please speak slowly and clearly. \*\*\*

**Hours of Operation:** 8:30am – 4:00pm, Monday – Friday, EST

*DUE to COVID-19, all ICCR/OOJ operations are being conducted remotely, please have patience.*

**Point of Contact:** Toni Smith-Brown

**Phone:** 347-573-0305

**Fax:** 347-396-7355 (confidential)

**Email:** Tsmith1@health.nyc.gov (do not email identifiable patient information)

## Reactors and Case Reports

Reactive tests and case reports for STI/HIV, for NYC residents, will be accepted and investigated based on local protocol

Dispositions will NOT be provided unless specifically requested

**Method of transmitting:** Fax or Mail

## Contacts

NYC residents that are contacts to STI/HIV will be accepted and investigated (**see table below**)

Clusters are NOT accepted.

Contacts without adequate locating information, will NOT be accepted (ie: name, age or DOB, address, and/or telephone number, email address)

**Method of transmitting:** Fax

Infection	Accepted and investigated	Last date of Exposure	Disposition Returned
Syphilis	Contacts to syphilis of any stage	<12 months	14 business days

HIV	Contacts to HIV	ANY	30 business days
Gonorrhea (GC) & Chlamydia (CT)	Contacts to GC with reduced susceptibility to azithromycin, ceftriaxone or cefixime	<3 months	14 business days
	Contacts that are known to be pregnant	<3 months	
	Contacts <=18 years old	<3 months	
	Female contacts >18 years old with exposure	<3 months	
	Males contacts >18 years old with exposure	<1 month	

### Syphilis Record Search & Provider Follow Up

Please specify the information requested. Results returned within 14 business days.

**Method of transmitting:** Fax

### HIV Record Search

**Point of Contact:** Biagia Neal, Bureau of HIV\*

**Phone:** 347-396-2508 or 929-512-0973

\*Staff must be designated in the CSTE HIV contact list to contact Biagia Neal for information regarding HIV.

## NEW YORK STATE

Excluding New York City

Bureau of STD Control  
PO Box 2047  
Albany, NY 12220-0047  
**Phone:** (518) 474-3598  
**Fax:** (518) 474-3491

**Hours of Operation:** 8:00am – 3:30pm EST

### Syphilis

**Point of Contact:** Suzanne Whitford  
**Email:** Suzanne.whitford@health.ny.gov  
**Phone:** 518-474-8181

**Backup Point of Contact:** Theresa Muscatiello  
**Phone:** 518-473-4427 Telephone contact is preferred.  
**Email:** Theresa.muscatiello@health.ny.gov

**Syphilis stages/reactors accepted and followed:** All P&S, EL followed and accepted.

**Method(s) of transmitting confidential patient data:** Call POC or fax: 518-474-3491

**Return of disposition/time frame:** Two weeks.

### HIV

**Point of Contact:** Suzanne Whitford  
**Email:** Suzanne.whitford@health.ny.gov  
**Phone:** 518-474-8181  
**Fax:** 518-474-3491

**Backup Point of Contact:** Theresa Muscatiello same contact information as above.

**HIV cases/contacts followed:** All newly identified infections and partners will be followed.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Thirty days.

### Gonorrhea (GC)

**Point of Contact:** Suzanne Whitford; back-up is Theresa Muscatiello, Same information as above. Telephone contact is preferred.

**GC cases/contacts accepted and followed:** Infected and partners.

**Method(s) of transmitting confidential patient data:** Call POC or contact via fax.

**Return of disposition/time frame:** Two weeks

## Chlamydia (CT)

**Point of Contact:** Suzanne Whitford and backup is Theresa Muscatiello; same information as above.

**CT cases/contacts accepted and followed:** Infected and partners.

**Method(s) of transmitting confidential patient data:** Call POC or contact via fax.

**Return of disposition/time frame:** Two weeks

## NORTH CAROLINA

### Syphilis: Contacts, suspects, associates, or reactors

**Point of Contact:** Yolanda Morning

**Phone:** 910-486-1710

**Fax:** 910-486-1346 (Preferred)

**E-mail:** yolanda.morning@dhhs.nc.gov

**Mailing address:** NC DHHS Communicable Disease Branch, 2950 Village Drive, Suite 200, Fayetteville, NC 28304

**Syphilis stages/reactors accepted and followed:** All contacts, suspects, associates, and reactors.

**Method(s) of transmitting confidential patient data:** call POC or fax during hours of operation.

**Return of disposition/time frame:** two weeks

### Syphilis: Record Search Request

**Point of Contact:** Lisa Dixon

**Phone:** 919-546-1759

**Fax:** 828-670-5040 (Preferred)

**E-mail:** lisa.dixon@dhhs.nc.gov

**Mailing Address:** NC DHHS Communicable Branch, 12 Barbetta Dr, Asheville, NC 28806

**Method(s) of transmitting confidential patient data:** call POC or fax during hours of operation.

**Return of disposition/time frame:** two weeks for 700, four weeks for 900.

### HIV: Contacts, suspects, or associates (excluding reactors & 900 record search)

**Point of Contact:** Lisa Dixon

**Phone:** 919-546-1601

**Fax:** 828-670-5040 (preferred)

**E-mail:** lisa.dixon@dhhs.nc.gov

**Mailing address:** NC DHHS Communicable Disease Branch. 12 Barbetta Dr. Asheville, NC 28806.

**Method of transmitting confidential patient data:** Fax (preferred) or call POC during hours of operation. Return of disposition/timeframe: two weeks for 700, four weeks for 9--.

**Return of disposition/time frame:** four weeks

### HIV: Reactors and Record Search

**Point of Contact:** Denise Lucas

**Phone:** 919-546-1601(preferred for record search request)

**E-mail:** denise.lucas@dhhs.nc.gov

**Mailing Address:** NC DHHS, Communicable Disease Branch, 225 N McDowell St, Raleigh, NC 27603, 1902 Mail Service Center, Raleigh, NC 27699-1902

**Method of transmitting confidential patient data:** Call POC for R/S. Mail Reactors to above address.

## Gonorrhea and Chlamydia

**Point of Contact:** Danielle Robinson

**Phone:** 919-546-1686

**Fax:** 919-715-7540

**E-mail:** danielle.robinson@dhhs.nc.gov

**Mailing Address:** NC DHHS, Communicable Disease Branch, 225 N McDowell St, Raleigh, NC 27603, 1902 Mail Service Center, Raleigh, NC 27699-1902

**Contacts accepted and followed:** All reactive tests are accepted for morbidity purposes. Contacts not accepted. Unable to provide dispositions.

**Method(s) of transmitting confidential data:** Mail (preferred) or fax to Danielle Robinson



## NORTH DAKOTA

North Dakota Department of Health  
Division of Disease Control  
2635 East Main Ave  
Bismarck, ND 58506-5520

**Phone:** 701-328-2378

**Fax:** 701-328-2499

**HIV Phone:** Same as fax number.

**Hours of Operation:** 9:00am – 3:00pm CST

### Syphilis

**Point of Contact:** Shari Renton

**Email:** slrenton@nd.gov

**Phone:** 701-328-1059

**Syphilis stages/reactors accepted and followed:** All reactors, all stages.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Yes, two weeks

### HIV

**Point of Contact:** Shari Renton (same as below)

**HIV cases/contacts followed:** All newly identified infections; prior infections with STD

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Yes, two weeks

### Gonorrhea (GC)

**Point of Contact:** Shari Renton (same as below)

**GC cases/contacts accepted and followed:** Only infected & untreated

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Yes; two weeks

### Chlamydia (CT)

**Point of Contact:** Shari Renton (same as below)

**CT cases/contacts accepted and followed:** only infected & untreated.

**Method(s) of transmitting confidential patient data:** Call POC during hours of operation.

**Return of disposition/time frame:** No

## OHIO

### STD Surveillance

HIV/STD/Hepatitis Section Ohio Department of Health 246 North High Street Columbus, OH 43215

**Hours of Operation:** 8:00am – 5:00pm

Internet Partner Services (IPS) – Contacts are accepted for Early Syphilis, HIV, and co-infected HIV/STI.

### Syphilis

**Point of Contact:** Charlotte Sinkula

**Phone:** 614-644-7562

**Email:** charlotte.sinkula@odh.ohio.gov

**Secure Fax:** 614-387-2602

**Back Up Point of Contact:** Mary McNeill

**Phone:** 614-466-5069

**Email:** mary.mcneill@odh.ohio.gov

**Secure Fax:** 614-387-2602

**Syphilis stages/reactors accepted and followed:** All P&S, EL contacts / all reactors.

Method(s) of transmitting confidential patient data: Fax Contact Field Record to 614-387-2602.

Mail reactors to HIV Surveillance.

**Return of disposition/time frame:** Two weeks

### HIV

**Point of Contact:** Same contact information as listed above.

**HIV cases/contacts followed:** All Ohio HIV Infections and Contacts are accepted and followed.

**Method(s) of transmitting confidential patient data:** Fax Field Record to 614-387-2602.

**Return of disposition/time frame:** One Month

### Gonorrhea (GC)

**Point of Contact:** Same contact information as listed above.

**GC cases/contacts accepted and followed:** No contacts except for pregnant females and cases/contacts to resistant GC. All positive lab results are accepted for morbidity only.

**Method(s) of transmitting confidential patient data:** Fax Field Record to 614-387-2602

**Return of disposition/time frame:** None

## Chlamydia (CT)

**Point of Contact:** Same contact information as listed above.

**CT cases/contacts accepted and followed:** No contacts except for pregnant females. All positive lab results are accepted for morbidity only.

**Method(s) of transmitting confidential patient data:** Fax Field Record to 614-387-2602.

**Return of disposition/time frame:** None

## OKLAHOMA

Oklahoma State Department of Health

123 Robert S Kerr Ave, MS 0308

Oklahoma City, OK 73102

**Hours of Operation:** 9:00 am – 4:00 pm CST

### Syphilis

**Point of Contact:** Sherron Johnson

**Email:** SherronJ@health.ok.gov

**Phone:** 405-426-8351

**Cell:** 405-693-2496

**Fax:** 405-900-7586

**Point of Contact:** Shantelle Scott

**Email:** Shantelle.Scott@health.ok.gov

**Phone:** 405-426-8349

**Cell:** 405-693-5136

**Fax:** 405-900-7586

**Syphilis stages/reactors accepted and followed:** All reactors and syphilis stages except late and late latent. All reactors 16 dilution or greater for ages 41-54, and all reactors 32 dilution or greater for 55 plus years.

**Method(s) of transmitting confidential patient data:** Call and fax POC.

**Return of disposition/time frame:** Yes, within two weeks

### HIV

**Point of Contact:** Kelly Smith

**Email:** KelleyS@health.ok.gov

**Phone:** 1 (405) 426-8333

**Fax:** 405-900-7586

**Point of Contact:** Sherron Johnson and Shantelle Scott (see contact information above)

**HIV cases/contacts followed:** All newly identified infections with dx date not greater than one year; prior infections with syphilis.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Yes, within four weeks.

### Gonorrhea (GC)

**Point of Contact:** Sherron Johnson (see contact information above)

**GC cases/contacts accepted and followed:** Only untreated pregnant females.

**Method(s) of transmitting confidential patient data:** Call and fax POC:

**Return of disposition/time frame:** Yes, within four weeks.

## Chlamydia (CT)

**Point of Contact:** Sherron Johnson and Shantell Scott (see contact information above)

**CT cases/contacts accepted and followed:** Only untreated pregnant females.

**Method(s) of transmitting confidential patient data:** Call and fax POC.

**Return of disposition/time frame:** Yes, within four weeks.

## OREGON

Oregon Health Authority  
800 NE Oregon Street, Suite 1105  
Portland, OR 97232

**Hours of Operation:** 8:00am – 5:00 pm Monday through Friday Pacific Daylight Time.

### Syphilis

**Point of Contact:** Jennifer “Jenn” Li

**Email:** jennifer.h.li@state.or.us

**Phone:** 971- 673-0152

**Fax:** 971- 673-0178

**Point of Contact:** Joshua Ferrer

**Email:** joshua.s.ferrer@state.or.us

**Phone:** 971-673-0149

**Fax:** 971-673-0178

**Syphilis stages/reactors accepted and followed:** Reactors < 60, sex partners and clusters to P&S, early latent and latent unknown duration.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, Two weeks from reception.

### HIV

**Point of Contact:** Lea Bush

**Phone:** 971 673-0183

**Fax:** 971 673-0179

**HIV cases followed:** all newly identified infections and record searches.

**Method(s) of transmitting confidential patient data:** Record searches by phone, sex partners to only HIV by fax.

**Point of Contact for HIV partners & prior infections with a current STD:** Jennifer (“Jenn”) LI

**Email:** jennifer.h.li@state.or.us

**Phone:** 971-673-0152

**Fax:** 971-673-0178  
**Return of disposition/time frame:** Yes, two weeks from receipt.

### Gonorrhea (GC)

**Point of Contact:** Jennifer “Jenn” Li (same contact information as listed above).

**Alternate Point of Contact:** Joshua Ferrer (same contact information as listed above).

**GC cases/contacts accepted and followed:** All cases and contacts.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, two weeks from reception.

## Chlamydia (CT)

**Point of Contact:** Jennifer “Jenn” Li (same contact information as listed above).

**Alternate Point of Contact:** Joshua Ferrer (same contact information as listed above).

**Cases/contacts accepted and followed:** Generally, only infected & untreated.

**Method(s) of transmitting confidential patient data:**

**Return of disposition/time frame:** Generally, no.

## PENNSYLVANIA (Excluding Philadelphia)

Pennsylvania Communicable Diseases – STD

Room 1013 Health and Welfare Bldg

625 Forster Street

Harrisburg, PA 17120

**Hours of Operation:** Tuesday-Friday 7:45am – 5:45pm EST

### Syphilis

**Point of Contact:** Matthew James

**Email:** [maajame@pa.gov](mailto:maajame@pa.gov)

**Phone:** 717-547-3450

**Fax:** 717-705-8881 (secure)

**Back-up POC:** Stephen J. Kowalewski

**Email:** [c-skowalew@pa.gov](mailto:c-skowalew@pa.gov)

**Phone:** 717-547-3443

**Fax:** 717-441-3791 (secure)

**Syphilis stages/reactors accepted and followed:** All P&S reactors and contacts, all reactors  $\leq 29$  and high titer EL (1:8).

**Please note:** If the syphilis reactor is also co-infected with HIV, Mr. James can serve as the POC for HIV as well. This only pertains to co-infected cases.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Three weeks for syphilis reactors only; the STD program cannot provide HIV dispositions.

### HIV

**Point of Contact:** Jonathan Steiner

**Email:** [jsteiner@pa.gov](mailto:jsteiner@pa.gov)

**Phone:** 717-547-3436

**HIV cases/contacts followed:** All newly identified infections, named contacts

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** 3 weeks. Please note: disposition will be limited to whether OP or contact was located/notified due to Pennsylvania's Confidentiality of HIV-Related Information Act (Act 148).

### Gonorrhea (GC)

**Point of Contact:** Matthew James (Same contact information as listed above).

**GC cases accepted and followed:** HIV Co-infected and/or pregnant



**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Three weeks

**Back-up POC:** Stephen J. Kowalewski (Same contact information as listed above)

### Chlamydia (CT)

**Point of Contact:** Matthew James (Same contact information as listed above).

**CT cases accepted and followed:** HIV Co-infected and/or pregnant

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Three weeks

**Back-up POC:** Stephen J. Kowalewski (Same contact information as listed above)

## PHILADELPHIA

Philadelphia Department of Health  
Division of Disease Control – STD Program  
1930 South Broad Street, 2nd Floor  
Philadelphia, PA 19145

**Hours of Operation:** 8:30am – 5:00pm EST

### Syphilis

**Point of Contact:** James J. Williams

**Phone:** 215-685-6619 (confidential voicemail)

**Fax:** 215-238-6943 (confidential e-fax)

**Email:** [JamesJ.Williams@phila.gov](mailto:JamesJ.Williams@phila.gov)

**Backup Point of Contact:** Khadijah Reid (P: 215-685-6461, e-fax: same as below)

**Syphilis stages/reactors accepted and followed:** All reactors over 1:16 dil, regardless of age. For 1:8 and below, only those under 50 years of age. All named contacts followed.

**Method(s) of transmitting confidential patient data:** Preferred: e-Fax, alternative: call POC.

**Return of disposition/time frame:** Yes, two weeks

### Gonorrhea (GC)

**Point of Contact:** James J. Williams (Same as contact information listed above).

**GC cases/contacts accepted and followed:** All cases accepted, treatment will be confirmed. Contacts not accepted.

**Method(s) of transmitting confidential patient data:** See syphilis information listed above.

**Return of disposition/time frame:** Yes, two weeks.

### Chlamydia (CT)

**Point of Contact:** James J. Williams (Same as contact information listed above).

**CT cases/contacts accepted and followed:** Cases accepted as morbidity only. Contacts not accepted.

**Method(s) of transmitting confidential patient data:** See syphilis information listed above.

**Return of disposition/time frame:** Yes, two weeks.

### HIV PARTNER SERVICES

**Point of Contact:** Kristine Arrieta

**Email:** [Kristine.Arrieta@phila.gov](mailto:Kristine.Arrieta@phila.gov)

**Phone:** 215-685-6530

**Backup Point of Contact:** Cherie Walker-Baban (P: 215-685-6612)

**HIV cases/contacts followed:** All newly diagnosed cases; all previously diagnosed cases coinfecting with 700 or 300. All contacts accepted

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Yes, 30 days

## PUERTO RICO

Puerto Rico Department of Health  
STD Surveillance Office  
PO BOX 70184  
San Juan, PR 00936-8184

**Hours of Operation:** 8am – 4pm. Puerto Rico is in the Atlantic Time Zone –Atlantic Standard Time (AST); PR does not observe daylight saving time.

**Point of Contact:** Jose Colon, Supervisor; and Wilma Marrero, Senior Surveillance Clerk & DIS.

**Email:** josecolon@salud.gov.pr EM: wilma@salud.gov.pr

**Phone:** 787-765-2929, ext. 3583, 3584, 3585 or 2950

**Fax:** 787-274-5510 Confidential Fax: or 787-274-5579

### Syphilis

**Syphilis stages/reactors accepted and followed:** All syphilis P&S, EL, LL for all reactors under 44 years of age. All contacts from P&S, EL cases.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, three to four weeks

### HIV

**HIV cases/contacts followed:** All newly identified infections; prior infections with an STD.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, three to four weeks.

### Gonorrhea (GC)

**GC cases/contacts accepted and followed:** Infected & untreated.

**Method(s) of transmitting confidential patient data:** Call or fax POC

**Return of disposition/time frame:** Yes, three to four weeks

### Chlamydia (CT)

**CT cases accepted and followed:** Females CT cases (only infected & untreated) up to 29 years of age; contacts with CT co-infection with gonorrhea, syphilis or HIV.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, three to four weeks.

## RHODE ISLAND

Rhode Island Department of Health  
Center for HIV, Hepatitis, STD and TB Epidemiology  
3 Capitol Hill  
Room 106  
Providence, RI 02908

### SYPHILIS

**Point of contact:** Johana Ramos  
**Email:** [Johana.Ramos@health.ri.gov](mailto:Johana.Ramos@health.ri.gov)  
**Phone:** 401-222-7540, cell: 401-639-3438  
**Fax:** 401-222-1105

**Point of contact:** Benjamin Lafazia  
**Email:** [Benjamin.Lafazia@health.ri.gov](mailto:Benjamin.Lafazia@health.ri.gov)  
**Phone:** 401-222-2594, cell: 401-265-3011  
**Fax:** 401-222-1105

Syphilis stages/reactors accepted and followed: All Primary, Secondary, Early Latent  
Method(s) of transmitting confidential patient data: call or fax POC (8:30-4:30 EST)  
Return of disposition/time frame: Within 2 weeks

### HIV

**Point of contact:** Benjamin Lafazia  
**Email:** [Benjamin.Lafazia@health.ri.gov](mailto:Benjamin.Lafazia@health.ri.gov)  
**Phone:** 401-222-2594, cell: 401-265-3011  
**Fax:** Fax transmission not accepted

**Point of contact:** Guillermo Ronquillo  
**Email:** [Guillermo.Ronquillo@health.ri.gov](mailto:Guillermo.Ronquillo@health.ri.gov)  
**Phone:** 401-222-7544, cell: 401-479-0149  
**Fax:** Fax transmission not accepted  
HIV cases/contacts followed: All newly identified diagnoses, partners to new HIV/AIDS diagnoses.  
Method(s) of transmitting confidential patient data: Call or mail to POC. NO FAX.  
Return of disposition/time frame: within 1 month

## GONORRHEA (GC)

**Point of contact:** Johana Ramos

**Email:** [Johana.Ramos@health.ri.gov](mailto:Johana.Ramos@health.ri.gov)

**Phone:** 401-222-7540, cell: 401-639-3438

**Fax:** 401-222-1105

**Point of contact:** Benjamin Lafazia

**Email:** [Benjamin.Lafazia@health.ri.gov](mailto:Benjamin.Lafazia@health.ri.gov)

**Phone:** 401-222-2594, cell: 401-265-3011

**Fax:** 401-222-1105

GC cases/contacts accepted and followed: Morbidity reports accepted. Untreated cases and cases from urban centers prioritized. Partners may not be initiated.

Method(s) of transmitting confidential patient data: Call or fax POC (8:30-4:30 EST)

Return of disposition/time frame: within 2 weeks

## CHLAMYDIA (CT)

**Point of contact:** Johana Ramos

**Email:** [Johana.Ramos@health.ri.gov](mailto:Johana.Ramos@health.ri.gov)

**Phone:** 401-222-7540, cell: 401-639-3438

**Fax:** 401-222-1105

CT cases/contacts accepted and followed: Morbidity reports accepted. Cases and partners not initiated for follow up

Method(s) of transmitting confidential patient data: Call or fax POC (8:30-4:30 EST)

Return of disposition/time frame: N/A

## SAN FRANCISCO

STD/HIV Program

San Francisco City Clinic

356 Seventh St.

San Francisco, CA 94103

**Hours of Operations:** Mon – Fri 8:00am – 5:00pm, PST.

### Syphilis

**Point of Contact:** Gloria Calero

**Email:** Gloria.Calero@sfdph.org

**Phone:** 415-487-5531

**Fax:** 415-431-4628 (confidential)

Syphilis stages/reactors accepted and followed: All syphilis stages/reactors.

Method(s) of transmitting confidential patient data: Phone or fax POC. (fax is confidential).

Return of disposition/time frame: Yes, (whenever possible) within two (2) weeks.

### HIV

**Point of Contact:** Gloria Calero (Same contact information as listed above)

**HIV cases/contacts followed:** All newly infected persons and contacts.

**Method(s) of transmitting confidential patient data:** Phone or fax POC. (fax is confidential).

**Return of disposition/time frame:** Yes, (whenever possible) within two weeks.

### Gonorrhea (GC)

**Point of Contact:** Inez Love

**Email:** Inez.love@sfdph.org.

**Phone:** 415-487-5524

**GC cases/contacts accepted and followed:** infected and untreated cases only.

**Method(s) of transmitting confidential patient data:** Phone or fax POC. (fax is confidential).

**Return of disposition/time frame:** Yes, (whenever possible) within two weeks.

### Chlamydia (CT)

**Point of Contact:** Inez Love (Same contact information as listed above)

**CT cases/contacts accepted and followed:** infected and untreated cases only.

**Method(s) of transmitting confidential patient data:** Phone or fax POC. (fax is confidential).

**Return of disposition/time frame:** Yes, (whenever possible) within two weeks.

## SOUTH CAROLINA

SC Department of Health and Environmental Control  
Mills/Jarrett Building, Surveillance and Technical Support  
2100 Bull Street  
Columbia, SC 29201

**Hours of Operation:** 8:30am to 5:00pm EST

### Syphilis

**Point of Contact:** Deborah Goodwin

**Phone:** 803-898-0864

**Email:** [GoodwiDH@dhec.sc.gov](mailto:GoodwiDH@dhec.sc.gov)

**Fax:** 803-898-0132 (confidential)

**Backup Point of Contact:** Mereena Coyac

**Phone:** 803-898-0630

**Email:** [coyacm@dhec.sc.gov](mailto:coyacm@dhec.sc.gov)

**Syphilis stages/reactors accepted and followed:** All Syphilis.

**Method(s) of transmitting confidential patient data:** Call or mail POC.

**Return of disposition/timeframe:** Two (2) weeks

### Gonorrhea (GC)

**Point of Contact:** Mereena Coyac

**Phone:** 803-898-0630

**GC cases/contacts accepted and followed:** All Cases and contacts.

**Method(s) of transmitting confidential patient data:** Call or mail POC

**Return of disposition/timeframe:** Two (2) weeks

### Chlamydia (CT)

**Point of Contact:** Mereena Coyac

**Phone:** 803-898-0630

**CT cases/contacts accepted and followed:** All cases and contacts

**Method(s) of transmitting confidential patient data:** Call or mail POC.

**Return of disposition/timeframe:** Two (2) weeks

### HIV

**Point of Contact:** Mereena Coyac

**Phone:** 803-898-0630

**HIV cases/contacts followed:** All Cases and Contacts to HIV.



**Method(s) of transmitting confidential patient data:** Call or mail POC.  
**Return of disposition/timeframe:** Thirty (30) days.

## SOUTH DAKOTA

South Dakota Department of Health

STD/HIV Program

615 E. 4<sup>th</sup> Street

Pierre, South Dakota, 57501

**Hours of Operations:** 8:00 am– 4:30pm

### Syphilis

**Point of Contact:** Bridget Dean, STD Program Coordinator

**Email:** [Bridget.Dean@state.sd.us](mailto:Bridget.Dean@state.sd.us)

**Phone:** 605-773-4794 (secure answering machine)

**Fax:** 605-773-5509 (secure fax)

**Syphilis stages/reactors accepted and followed:** All confirmed stages; all contacts.

**Method(s) of transmitting confidential patient data:** Call, send, secure fax, or mail POC.

**Return of disposition/time frame:** Yes, 3-4 weeks.

### HIV

**Point of Contact:** Susan Gannon, HIV Program Director

**Email:** Susan.Gannon@state.sd.us

**Phone:** 605-773-5952 (secure answering machine)

**Fax:** 605-773-5509 (secure fax)

**HIV cases/contacts followed:** Newly Identified and prior with current STD.

**Method(s) of transmitting confidential patient data:** Call POC OR mail ATTN: Christine Olson

**Return of disposition/time frame:** Yes, three to four Weeks

### Gonorrhea (GC)

**Point of Contact:** Mary Rea, STD Program Manager (same contact as listed above)

**GC cases/contacts accepted and followed:** All confirmed cases and all contacts

**Method(s) of transmitting confidential patient data:** Phone, secure fax, or mail POC.

**Return of disposition/time frame:** Yes, 3-4 weeks.

### Chlamydia (CT)

**Point of Contact:** Mary Rea, STD Program Manager (same contact as listed above)

**CT cases/contacts accepted and followed:** All confirmed cases and contacts to confirmed cases are prioritized based on geographic location, age, sex, race, ethnicity, pregnancy status, etc. and may not be followed depending on staffing resources.

**Method(s) of transmitting confidential patient data:** Phone, secure fax, or mail POC.

**Return of disposition/time frame:** Yes, 3-4 weeks.

## TENNESSEE

Tennessee Department of Health  
HIV/STD/Viral Hepatitis Section  
4<sup>th</sup> Floor Andrew Johnson Tower  
710 James Robertson Parkway  
Nashville, TN 37243

**Hours of Operation:** 7:00 am– 3:30 pm CDT

### Syphilis

**Point of Contact:** Alfred Webb

**Email:** Alfred.webb@tn.gov

**Phone:** 615-532-8488

**Alternate Point of Contact:** Darnell Brooks

**Email:** STD.Health@tn.gov

**Phone:** 615-253-0678

**Method(s) of transmitting confidential patient data:** secure email STD.Health@tn.gov or secure fax at 615-401-7684

### Syphilis

**Syphilis stages/reactors accepted and followed:** All stages accepted and followed.

**Return of disposition/time frame:** Yes, two weeks.

**Syphilis Contacts:** Contacts should include name or alias, DOB or age, address, city/state, phone number, description if available, exposure dates and frequency.

**Return of disposition/time frame:** Yes, two weeks.

### HIV

**HIV cases/contacts followed:** All contacts to HIV and positive lab tests.

**Method(s) of transmitting confidential patient data:** Secure email or fax.

**HIV Contacts:** Contacts should include name or alias, DOB or age, address, city/state, phone numbers, description if available, exposure dates and frequency.

**Return of disposition/time frame:** Yes, two weeks on contacts who are also contacts to HIV and/or Syphilis

### Gonorrhea (GC) and Chlamydia

**Morbidity Reports:** We accept all positive laboratory reports and/or morbidity reports.

**Contacts to GC/CT:** Accepted but no return disposition will be sent unless also a contact to syphilis and/or HIV.

**Method (s) of transmitting confidential patient data:** Secure email or fax.

**Return of disposition/time frame:** Yes, two weeks on contacts who are also contacts to HIV

and/or Syphilis

## TEXAS

Texas Dept. of State Health Services  
Epidemiology and Surveillance Branch  
PO Box 149347, MC 1873  
Austin, TX 78714

**Primary point of contact:**

Paul Hurlburt  
Work cell: 512-458-0037  
[paul.hurlburt@dshs.texas.gov](mailto:paul.hurlburt@dshs.texas.gov)

**Program Manager:**

Aubrey Braglia  
Work cell: 512-461-4564  
[aubrey.braglia@dshs.texas.gov](mailto:aubrey.braglia@dshs.texas.gov)

**Branch Manager:**

D'Andra Luna  
Work cell: 512-632-7276  
[dandra.luna@dshs.texas.gov](mailto:dandra.luna@dshs.texas.gov)

**HIV, Syphilis, Gonorrhea, Chlamydia**

Stages/reactors/contacts/cases accepted and followed: All 900, 700 (please provide 700 staging, if possible.)

200 and 300 pregnant cases accepted.

Method(s) of transmitting confidential patient data:

Fax: **512-989-4015** – please follow CDC confidentiality and security guidelines.

Phone – Our voicemail system is not approved to store confidential information. Please do not leave confidential information during a voice message.

Please do not email confidential information. TX DSHS prohibits any exchange of patient health information via unsecured email.

Return of disposition/time frame: 3-4 weeks, **on-request**.

## USVI

Virgin Islands Department of Health

1303 Hospital Ground – Suite 3

St. Thomas, V.I. 00802

**Hours of Operation:** 8:00 am – 5:00 pm

### Syphilis

**Point of Contact:** Jasper Lettsome, Administrator STD/HIV/TB Program

**Email:** jasper.lettsome@usvi-doh.org

**Phone:** 340-774-3168/340- 774-9000 ext 4663

**Fax:** 340-715-1589 (Secured Fax Line)

**Backup Point of Contact:** Dr. Tai Hunte

**Email:** tai.hunte@usvi-doh.org

**Phone:** 340- 774-9000 ext 4660/340-774-3168

**Fax:** 340 -715-1589 (Secured Fax Line)

**Syphilis stages/reactors accepted and followed:** 710/720/730 (primary, secondary, EL).

**Method(s) of transmitting confidential patient data:** Call POC, fax, or mail to contact address as listed above. Please be sure to double enveloped.

**Return of disposition/time frame:** Seven days

### HIV

**Point of Contact:** Neil Marshall, HIV Prevention Coordinator

**Email:** neil.marshall@usvi-doh.org

**Phone:** 340-774-3168/340- 774-9000 ext 4667

**Fax:** 340-715-1589 (Secured Fax Line)

**Secondary Point of Contact:** Jasper Lettsome, Administrator (Same contact information as listed above)

**Tertiary Point of Contact:** Dr. Tai Hunte (Same contact information as listed above)

**HIV cases/contacts followed:** Yes

**Method(s) of transmitting confidential patient data:** Call POC, fax, or mail to contact address as listed above. Please be sure to double enveloped.

**Return of disposition/time frame:** Fourteen days

### Gonorrhea (GC)

**Point of Contact:** Jasper Lettsome, Administrator (Same contact information as listed above)

**Backup Point of Contact:** Dr. Tai Hunte (Same contact information as listed above)

**GC cases/contacts accepted and followed:** Yes

**Method(s) of transmitting confidential patient data:** Call POC, fax, or mail to contact address

as listed above. Please be sure to double enveloped.

**Return of disposition/time frame:** Seven days

### Chlamydia (CT)

**Point of Contact:** Jasper Lettsome, Administrator: (Same contact information as listed above)

**Backup Point of Contact:** Dr. Tai Hunte (Same contact information as listed above)

**CT cases/contacts accepted and followed:** Yes

**Method(s) of transmitting confidential patient data:** Call POC, fax, or mail to contact address as listed above. Please be sure to double enveloped.

**Return of disposition/time frame:** Seven days

## UTAH

Department of Health  
Bureau of Epidemiology  
Box 142104  
Salt Lake City UT 84114-2104

**Hours of Operation:** Mon-Fri 8:00am – 5:00pm

### Syphilis

**Point of Contact:** Nikki Baer

**Email:** abaer@utah.gov

**Phone:** 801-538-6174

**Fax:** 801-538-9913

**Syphilis stages/reactors accepted and followed:** All.

**Method(s) of transmitting confidential patient data:** Call POC or fax.

**Return of disposition/time frame:** Yes; two weeks

### HIV

**Point of Contact:** Nikki Baer

**Email:** abaer@utah.gov

**Phone:** 801-538-6174

**Fax:** 801-538-9913

**Backup Point of Contact:** Nuzhat Majid

**Email:** nmajid@utah.gov

**Phone:** 801-538-6162

**Fax:** 801-538-9913

**HIV cases/contacts followed:** All cases/contacts.

**Method(s) of transmitting confidential patient data:** Call POC or fax.

**Return of disposition/time frame:** Yes, two weeks

### Gonorrhea (GC)

**Point of Contact:** Nikki Baer (Same contact information as listed above).

**GC cases/contacts accepted and followed:** All case and contacts.

**Method(s) of transmitting confidential patient data:** Call POC or fax.

**Return of disposition/time frame:** Yes, two weeks

## Chlamydia (CT)

**Point of Contact:** Nikki Baer (Same contact information as listed above).

**CT cases/contacts accepted and followed:** All case and contacts.

**Method(s) of transmitting confidential patient data:** Call POC or fax.

**Return of disposition/time frame:** Yes, two weeks



## VERMONT

STD Program VDH  
108 Cherry St.  
PO Box 70 Room 304  
Burlington, VT 05402

**Hours of operation:** 9:00am – 4:00pm EST

### Syphilis

**Point of Contact:** Daniel Daltry

**Email:** daniel.daltry@vermont.gov

**Phone:** 802-863-7305

**Syphilis stages/reactors accepted and followed:** All P&S.

**Method(s) of transmitting confidential patient data:** Call POC

**Return of disposition/time frame:** Yes, two weeks

### HIV

**Point of Contact:** Roy Belcher

**Email:** roy.belcher@vermont.gov

**Phone:** 802-863-7572

HIV cases/contacts followed All newly identified infections; prior infections with a current STD.

**Method(s) of transmitting confidential patient data:** Call POC

**Return of disposition/time frame:** Yes, two weeks.

### Gonorrhea (GC)

**Point of Contact:** Daniel Daltry (Same as above).

**GC cases/contacts accepted and followed:** All cases.

**Method(s) of transmitting confidential patient data:** Call POC during hours of operation.

**Return of disposition/time frame:** Yes, two weeks

### Chlamydia (CT)

**Point of Contact:** Daniel Daltry (Same contact information as listed above).

**CT cases/contacts accepted and followed:** All cases.

**Method(s) of transmitting confidential patient data:** Call POC during hours of operation.

**Return of disposition/time frame:** No

## VIRGINIA

Virginia Department of Health  
109 Governors St. 2<sup>nd</sup> Floor  
Richmond, VA 23219

**Hours of Operation:** M-F 7am-3pm EST

**Method of Contact:** Confidential phone, fax, or mail

**Main Fax:** 804-864-7970

**Alternate Fax:** 804-864-8143

**Main Phone:** 804-864-7964

### Syphilis

**Primary Point of Contact:** Justin Kittle

**Email:** [justin.kittle@vdh.virginia.gov](mailto:justin.kittle@vdh.virginia.gov)

**Phone:** 804 864-7994

**Fax:** 804-864-7970

**Back-up Point of Contact:** Katherine Fite

**Phone:** 804-864-7319

**Email:** [katherine.fite@vdh.virginia.gov](mailto:katherine.fite@vdh.virginia.gov)

#### **Syphilis stages/reactors accepted and followed according to program priorities:**

- All cases of early syphilis (priority follow-up is conducted for known P&S cases) and late or unknown duration
- Patients with a titer of 1:16 or higher
- Patients with a titer of 1:8 or lower less than 70 years old
- Pregnant patients with any reactive syphilis serology
- Patients 19 years old or younger
- Contacts to early syphilis with exposure dates < 12 months
- Suspects (social contacts) who are symptomatic for syphilis (S1s) or sex partners of a person who is a known case of syphilis (S2s)
- Female contacts and S3s who are known to be pregnant, regardless of exposure date

**Method(s) of transmitting confidential patient data:** Call POC, fax during hours of operation or establish electronic reporting.

**Return of disposition/time frame:** two weeks

### HIV

**Point of Contact:** Kevin Jones and Katherine Fite (Same contact information listed above)

#### **HIV cases/contacts followed according to program priorities:**

- All newly identified infections
- Prior infections diagnosed within the past six months and not interviewed

- Prior infections concurrent with early syphilis
- Prior infections with a detectable viral load concurrent with gonorrhea
- Contacts to newly diagnosed HIV with exposure dates < 12 months
- Contacts to HIV with a co-infection of syphilis and/or GC with exposure dates < 12 months
- Female contacts and S3s who are known to be pregnant, regardless of exposure date

**Method(s) of transmitting confidential patient data:** Call POC to inform POC of intent to fax or establish electronic reporting.

**Return of disposition/time frame:** two weeks

### Gonorrhea (GC) and Chlamydia (CT)

**Point of Contact:** Kevin Jones and Katherine Fite (Same contact information listed above)

**GC/CT cases/contacts accepted and followed according to program priorities:**

- Infected pregnant patients
- GC repeaters (positive two times within 6 month time period)
- GC indicative of resistance to treatment
- Female contacts and S3s who are known to be pregnant, regardless of exposure date
- Contacts to pregnant patients with GC
- All contacts to GC with reduced susceptibility to antibiotics to azithromycin, ceftriaxone or cefixime, regardless of exposure date
- Suspected or confirmed disseminated gonorrhea infections
- Partners to suspected or confirmed disseminated gonorrhea infections

**Method(s) of transmitting confidential patient data:** Call POC, fax during hours of operation or establish electronic reporting.

**Return of disposition/time frame:** two weeks

### CONTACTS

VA residents that are OOJ contacts must include:

- minimum patient location information (name, age or DOB, and address and/or phone number) AND
- exposure information (FSE and LSE)

## WASHINGTON D.C.

District of Columbia Department of Health  
HIV/AIDS, Hepatitis, STD and Tuberculosis Administration  
Strategic Information Division  
899 North Capitol Street, NE, 4<sup>th</sup> Floor  
Washington, DC 20002

**Hours of Operation:** 8:15 – 4:45 EST

### **Surveillance Coordinator**

Brittani Saafir-Callaway, PhD, MPH  
Pronouns: She/Her/Hers  
Supervisory Public Health Analyst  
Core Surveillance Branch Chief  
Strategic Information Division  
HIV/AIDS, Hepatitis, STD and TB Administration  
Brittani.Saafir@dc.gov  
Main: 202-727-4900  
Direct: 202-671-5002  
Fax: 202-673-4367

### **Field Operations Manager**

Toni Flemming  
Pronouns: She/Her/Hers  
DC Department of Health  
HIV, AIDS, Hepatitis, STD, TB Administration  
STD/TB Division  
Toni.Flemming@dc.gov  
Office: 202-442-4768  
Mobile: 202-834-6309

### **DC Health and Wellness Center**

Destiny Liverpool  
Pronouns: She/Her/Hers  
DC Department of Health  
HIV, AIDS, Hepatitis, STD, TB Administration  
STD/TB Division  
Destiny.Liverpool@dc.gov  
Office: 202-442-5994 -delete this number  
Mobile: 202-770-8849

At this time we are requesting all jurisdictions use the following HIPPA-compliant form to submit requests: <https://redcap.doh.dc.gov/surveys/index.php/surveys/?s=8YLKR9AJJ7>

Please note: Requests made of the DC Health and Wellness Center are not completed by our surveillance team. If you would like a search of our surveillance systems, do not select the DC Health and Wellness Center.

The following surveillance staff will be responsible for completing record search requests by jurisdiction:

<b>Investigator</b>	<b>Phone Number</b>	<b>Email Address</b>	<b>Jurisdictions</b>
Volta Asbury	202-671-4943	<a href="mailto:Volta.Asbury@dc.gov">Volta.Asbury@dc.gov</a>	AL, AK, AS, AZ, AR, CA, CO, CT, DE, FL, GA, GU, HI, ID, IN
Patrice Ward	202-671-4951	<a href="mailto:Patrice.Ward@dc.gov">Patrice.Ward@dc.gov</a>	CHI, IL, IA, KS, KY, LAC, LA, ME, MA, MI, MN, MS, MO, PR
Sabrina Nettles	202-671-4959	<a href="mailto:Sabrina.Nettles@dc.gov">Sabrina.Nettles@dc.gov</a>	BAL, MD
Francoise Uwimana	202-442-4771	<a href="mailto:Francoise.Uwimana@dc.gov">Francoise.Uwimana@dc.gov</a>	MT, NE, NV, NH, NJ, NM, NYC, NYS, NC, ND, NMI, OH, OK, OR
Alberta Roye	202-727-6408	<a href="mailto:Albert.Roye@dc.gov">Albert.Roye@dc.gov</a>	PA, PHL, RI, SF, SC, SD, TN, TX, UVI, UT, VT, WA, WV, WI, WY
Luckeya McCarroll	202-671-4907	<a href="mailto:Luckeya.McCarroll@dc.gov">Luckeya.McCarroll@dc.gov</a>	VA

Specifications for each type of request are below:

HIV, Syphilis, Gonorrhea, Chlamydia

Disease	Activity	Point of Contact	Phone	Fax	OOJ Investigations Accepted	Response Goals
HIV	Reactors	See above by jurisdiction		202-673-4367	<ul style="list-style-type: none"> <li>• Not applicable</li> </ul>	No response provided
	Record Searches				<ul style="list-style-type: none"> <li>• Newly diagnosed – &lt;1 yr. from diagnosis date</li> <li>• Pregnant</li> </ul>	5 business days from notification
	Partners, Suspects, and Associates	Destiny Liverpool	Office: 202-442-5994- Mobile: 202-770-8849	202-673-4367	<ul style="list-style-type: none"> <li>• Partners, Suspects, and Associates exposed to a person with a new HIV diagnosis of &lt; 1 Year</li> </ul>	10 business days from notification
Syphilis	Reactors	See above by jurisdiction		202-673-4367	<ul style="list-style-type: none"> <li>• Not applicable</li> </ul>	No response provided
	Record Searches				<ul style="list-style-type: none"> <li>• Primary, secondary, early non-primary non secondary</li> <li>• Clinical manifestations</li> <li>• Pregnant women</li> </ul>	5 business days from notification
	Partners, Suspects, and Associates	Destiny Liverpool	Office: 202-442-5994- Mobile: 202-770-8849	202-673-4367	<ul style="list-style-type: none"> <li>• Partners, Suspects, and Associates exposed to a person with primary, secondary, or early non-primary/non secondary syphilis [710/720/730]</li> <li>• Partners, Suspects, and Associates exposed to a person with co-infected with an early syphilis/ HIV diagnosis. [900/950]</li> </ul>	10 business days from notification

HIV, Syphilis, Gonorrhea, Chlamydia Cont.

Disease	Activity	Point of Contact		Phone	Fax	OOJ Investigations Accepted
Gonorrhea	Reactors	See above by jurisdiction		202-673-4367	<ul style="list-style-type: none"> <li>Not applicable</li> </ul>	No response provided
	Record Searches				<ul style="list-style-type: none"> <li>Positive results with site of infection = rectal</li> <li>Pregnant</li> </ul>	5 business days from notification
	Partners, Suspects, and Associates	Destiny Liverpool	Office: 202-442-5994- Mobile: 202-309-1682	202-673-4367	<ul style="list-style-type: none"> <li>Partners, Suspects, and Associates <b>MUST</b> be exposed to a person co-infected with primary, secondary, early non-primary non secondary syphilis, or HIV infection [710/720/730/900/950]</li> </ul>	10 business days from notification
Chlamydia	Reactors	See above by jurisdiction		202-673-4367	<ul style="list-style-type: none"> <li>Not applicable</li> </ul>	No response provided
	Record Searches				<ul style="list-style-type: none"> <li><b>MUST</b> be co-infected with HIV- &lt;1 yr. from diagnosis date, or primary, secondary, early non-primary non-secondary syphilis</li> </ul>	5 business days from notification
	Partners, Suspects, and Associates	Destiny Liverpool	Office: 202-442-5994- Mobile: 202-309-1682	202-673-4367	<ul style="list-style-type: none"> <li>Partners, Suspects, and Associates <b>MUST</b> be exposed to a person co-infected with primary, secondary, early non-primary non secondary syphilis, or HIV infection [710/720/730/900/950]</li> </ul>	10 business days from notification

## WASHINGTON

Washington State Department of Health  
Disease Control and Health Statistics  
Infectious Disease Assessment Unit  
P.O Box 47838  
Olympia, WA 98501

**Hours of Operation:** 8:00 am – 5:00 pm Monday through Friday PST/PDT.

**STD Phone:** 360-878-4045 (7 am – 5:30 pm PST/PDT)

**STD Fax:** 360-236-3470

**HIV Phone:** 360-236-3414 (8 am – 5 pm PST/PDT)

**HIV Fax:** 360-586-5440 (Call before faxing.)

**ICCR Email:** STD\_ICCR@doh.wa.gov

### Syphilis

**Point of Contact:** Tasha Dusenbery

**Email:** [tasha.dusenbery@doh.wa.gov](mailto:tasha.dusenbery@doh.wa.gov)

**Phone:**

**Alternate Point of Contact:** Rayna Halloway

**Email:** [rayna.halloway@doh.wa.gov](mailto:rayna.halloway@doh.wa.gov)

**Phone:** 360-236-3433

**Alternate Point of Contact:** Michelle McCutcheon

**Email:** michelle.mccutcheon@doh.wa.gov

**Phone:** 360-298-3026

**Alternate Point of Contact:** Rachel Amiya

**Email:** [rachel.amiya@doh.wa.gov](mailto:rachel.amiya@doh.wa.gov)

**Phone:** 360-236-3445

**Syphilis stages/reactors accepted and followed:** All reactors <70 years; all stage morbidity and untreated; partners to primary, secondary, and early latent; partners to females of reproductive age (<50 years) and heterosexual males; social contacts (suspects) to primary and secondary cases.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, in two weeks.

### Gonorrhea (GC)

**Point of Contact:** Tasha Dusenbery (Same contact information as listed above for syphilis.)

**Alternate Points of Contact:** Rayna Halloway, Michelle McCutcheon, Rachel Amiya (Same contact information as listed above for syphilis.)

**GC cases/contacts accepted and followed:** Morbidity or untreated or partners to gonorrhea; social contacts (suspects) to antibiotic-resistant cases.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, in 30 days.

### Chlamydia (CT)

**Point of Contact:** Tasha Dusenbery (Same contact information as listed above for syphilis.)

**Alternate Points of Contact:** Rayna Halloway, Michelle McCutcheon, Rachel Amiya (Same contact information as listed above for syphilis.)

**CT cases/contacts accepted and followed:** Morbidity or untreated only.

**Method(s) of transmitting confidential patient data:** Call or Fax POC.

**Return of disposition/time frame:** Yes, in 30 days.



## HIV Partner Services

**Point of Contact:** Tasha Dusenbery (Same contact information as listed above for syphilis)

**Alternate Points of Contact:** Rayna Hallaway, Michell McCutcheon, Rachel Amiya (Same contact information as listed above for syphilis)

**HIV cases/contacts followed:** All newly identified infections and partners to HIV.

**Method(s) of transmitting confidential patient data:** Call or fax POC.

**Return of disposition/time frame:** Yes, within two weeks.

## WEST VIRGINIA

West Virginia Dept. of Health and Human Resources  
Division of STD and HIV  
350 Capitol St. Room 125  
Charleston, WV 25301

**Hours of Operation:** 8:00 am – 4:00 pm EST

### Syphilis

**Point of Contact:** Debora Blankinship

**Email:** [Debora.s.blankinship@wv.gov](mailto:Debora.s.blankinship@wv.gov)

**Phone:** 304-356-4032

**Fax:** 304-558-6478

**Point of Contact:** Bridget Rose

**Email:** [Bridget.N.Rose@wv.gov](mailto:Bridget.N.Rose@wv.gov)

**Phone:** 304-558-2195

**Fax:** 304-558-6478

**Syphilis stages/reactors accepted and followed:** Positives and contacts to primary, secondary early latent however, will not accept late latent.

**Method(s) of transmitting confidential patient data:** Call, mail or fax. Call, mail or fax for contacts. Return of disposition/time frame: Yes, 30 days

### HIV

**Point of Contact:** Vicki Hogan

**Email:** [Vicki.A.Hogan@wv.gov](mailto:Vicki.A.Hogan@wv.gov)

**Phone:** 304-356-4071

**HIV cases/contacts followed:** All new positives and named contacts.

**Method(s) of transmitting confidential patient data:** Call or mail only. Call or mail for contacts.

**Return of disposition/time frame:** Thirty days

### Gonorrhea (GC)

**Point of Contact:** Debora Blankinship (Same contact information as listed above)

**Point of Contact:** Michael Workman

**Email:** [Michael.A.Workman@wv.gov](mailto:Michael.A.Workman@wv.gov)

**Phone:** 304-356-4006

**Fax:** 304-558-6478

GC positive labs with or without treatment.

**Method(s) of transmitting confidential patient data:** Call, mail or fax. No contacts, please.

**Return of disposition/time frame:** None

### Chlamydia (CT)

**Point of Contact:** Debora Blankinship/Michael Workman (Same contact information as listed above).

CT positive labs with or without treatment.

**Method(s) of transmitting confidential patient data:** Call, mail or fax. No contacts, please.

**Return of disposition/time frame:** None

## WISCONSIN

1 West Wilson St Room 256

PO Box 2659

Madison, WI 53701-2659

**Hours of Operation:** 8:00am-4:00pm CST

### Syphilis

**Point of Contact:** Craig Berger

**Email:** Craig.Berger@dhs.wisconsin.gov

**Phone:** 608-266-1323

**Fax:** 608 261-9301

**Point of Contact:** Anne Maries Gates

**Email:** AnneMarie.Gates@wisconsin.gov

**Phone:** 608 266-7945

**Fax:** 608 261-9301

**Syphilis stages/reactors accepted and followed:** All stages and reactors.

**Method(s) of transmitting confidential patient data:** Call POC or fax.

**Return of disposition/time frame:** Two weeks

### HIV

**Point of Contact:** Vipul Shukla/Elizabeth Schroeder

**Phone:** 608-266-3031/608-261-8885

**Fax:** 608-266-1288

**Email:** vipul.shukla@dhs.wisconsin.gov/elizabeth.schroeder1@dhs.wisconsin.gov

**HIV followed:** All newly identified and prior infections with reasons for follow up.

**Method(s) of transmitting confidential patient data:** Call POC.

**Return of disposition/time frame:** Four weeks

### Gonorrhea (GC)

**Point of Contact:** Anne Maries Gates (Same contact information as listed above).

**Alternate Point of Contact:** Brandon Kufalk (Same contact information as listed above).

**GC cases/contacts accepted and followed:**

All cases are accepted and will be sent to local health department. Follow-up depends on local health department criteria.

**Method(s) of transmitting confidential patient data:** Call POC or fax.

**Return of disposition/time frame:** If follow-up is required, it will be returned in two weeks.

### Chlamydia (CT)

**Point of Contact:** Anne Maries Gates (Same contact information as listed above).

**Alternate Point of Contact:** Brandon Kufalk (Same contact information as listed above).

**CT cases/contacts accepted and followed:** All cases are accepted and will be sent to local health department. Follow-up depends on local health department criteria.

**Method(s) of transmitting confidential patient data:** Call POC or fax.

**Return of disposition/time frame:** If follow-up is required, it will be returned in two weeks

## WYOMING

Wyoming Department of Health, Communicable Disease Unit

122 West 25th St., 3rd Floor West

Cheyenne, WY 82002

**Fax:** 307.777.5279

**Hours of Operation:** 8:00am to 5:00pm, M-F

### Syphilis

**Point of Contact:** Brianne Dunivent-Cronk

**Email:** Brianne.Dunivent-cronk@wyo.gov

**Phone:** 307-777-8005

**Fax:** 307-777-5279 (Confidential)

**Syphilis stages/reactors accepted and followed:** Newly diagnosed and/or untreated.

**Method(s) of transmitting confidential patient data:** Fax POC.

**Return of disposition/time frame:** Only as requested.

### HIV

**Point of Contact:** Sarah Newsy

**Email:** Sarah.newsly@wyo.gov

**Phone:** 307-777-8939

**Fax:** 307.777.5279

**HIV cases/contacts followed:** All newly diagnosed, CD4 and Viral Load reports.

**Method(s) of transmitting confidential patient data:** Call POC

### Gonorrhea (GC)

**Point of Contact:** Brianne Dunivent-Cronk

**Email:** Brianne.Dunivent-cronk@wyo.gov

**Phone:** 307-777-8005

**Fax:** 307-777-5279 (Confidential)

**GC cases/contacts accepted and followed:** Newly diagnosed and/or untreated.

**Method(s) of transmitting confidential patient data:** Confidential Fax: 307-777-5279

**Return of disposition/time frame:** Only as requested.

### Chlamydia (CT)

**Point of Contact:** Brianne Dunivent-Cronk (Same contact information as listed above).

**CT cases/contacts accepted and followed:** Infected and/or untreated.

**Method(s) of transmitting confidential patient data:**

**Confidential fax:** 307-777-5279.

**Return of disposition/time frame:** Only as requested.

## CANADA (All Provinces)

Centre for Communicable Disease and Infection Control  
Public Health Agency of Canada  
130 Colonnade Road  
Room 315B06 AL: 6503B  
Ottawa, Ontario K1A 0K9

### Syphilis/Gonorrhoea/Chlamydia

**Point of Contact:** Frederic Bergeron  
**Email:** phac.stinotificationits.aspc@canada.ca  
**Phone:** (613) 796-8510

**Alternate Point of Contact:** Carly Henry  
**Email:** phac.stinotificationits.aspc@canada.ca  
**Phone:** (343) 998-5982  
**Fax:** 613-952-4723 (Confidential fax)

**Cases/reactors accepted and followed:** All

**Contacts accepted and followed:** All

**Method(s) of transmitting confidential patient data:** Securely call, fax, or mail to POC.

**Return of disposition/time frame:** Yes; two-four weeks

### HIV

**Point of Contact:** Nisrine Haddad  
**Email:** phac.hass.aspc@canada.ca  
**Phone:** (613) 793-0819

**Alternate Point of Contact:** Ashley Weeks  
**Email:** phac.hass.aspc@canada.ca  
**Phone:** (613) 286-1328  
**Fax:** 613-952-4723 (Confidential fax)

**Cases/reactors accepted and followed:** All

**Contacts accepted and followed:** All

**Method(s) of transmitting confidential patient data:** Securely call, fax, or mail to POC.

**Return of disposition/time frame:** Yes; two-four weeks