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## TESTIMONY

**BILL: SB 82**      **Makes various changes concerning public health laws**

**NEVADA STATE HEALTH DIVISION**  
**CONTACT: DR. RANDALL TODD, STATE EPIDEMIOLOGIST**  
**PHONE: 684-5946**

Good afternoon, for the record I am Randall Todd representing the State Health Division.

Senate Bill 82 will allow public health authorities to respond appropriately to the threat of biological terrorism. A terrorist incident involving the use of a biological weapon would create some unique challenges. First among these is the fact that a biological weapon can be deployed in complete silence. Nothing needs to explode. There does not need to be any smoke. People would not be able to see, hear, smell, feel, or taste anything unusual. The second problem is that there would be no immediately identifiable casualties. The casualties would not appear until days or even weeks after the weapon had been deployed, depending on the incubation period of the biological agent used. A third problem is that the casualties, once they do start to appear, may have dispersed over a wide geographic area and will present themselves to their usual sources of medical care. Further, the initial symptoms are likely to be non-specific and easily confused with more common illnesses such as the flu. This will delay recognition and reporting of casualties to appropriate governmental agencies. A final problem is that some biological agents can be spread from person to person. So unlike a conventional or even a chemical weapon, biological weapons can cause injury in people who were nowhere near the original site of weapon deployment.

To address these issues, public health authorities need to be able to apply standard principles of disease control in unique and challenging situations. Existing public health laws need to be modified to ensure this can be accomplished. This bill addresses three key areas.

First it charges the State Board of Health with the responsibility to develop a system for public health surveillance of syndromes. Current law requires reporting of confirmed or suspected cases of specific diseases. In situations where there is a high profile gathering of people it will, at times, be prudent to look for patterns of symptoms rather than specific diseases. Ideally this would shorten the length of time between the deployment of a biological weapon and the recognition of casualties. Early recognition of casualties is critical for the timely application of other disease control strategies.

Secondly this bill augments the ability of public health authorities to place individuals or groups of individuals into isolation or quarantine. If it is determined that an individual or

a group of individuals is infected with a disease agent that can be transmitted from person to person, it is essential that public health authorities have the ability to prevent contact between infected and non-infected persons. Current law only allows this to happen on an individual basis. This bill proposes to allow health authorities to issue an isolation or quarantine order to a group of persons if there is reason to believe that they may all have been exposed or become infected with a disease that can spread from person to person.

Finally, this bill proposes to add due process for persons who are subject to an isolation or quarantine order. Current law does not provide these important protections.

The only suggestions we would offer to the proposed language in the bill would be to add a fourth paragraph to Section 8 on page 4 starting on line 11. The purpose of this new paragraph would be to make it clear that it is not the intent of this legislation to interfere with the ability of a hospital or medical facility to apply infection control practices that are designed to prevent or limit the transmission of communicable diseases within their own facilities. In addition we feel that it would be more appropriate for court proceedings to take place in, and for costs to be the responsibility of the county in which the quarantine or isolation is to take place. These changes can be accomplished by the deletion of the word "who" on page 7 line 41, the word "resides" on page 7 line 42 of Section 14, and deletion of everything after the word "filed" on page 10 line 41 as well as all words on lines 42 and 43 of Section 19. I have provided a marked copy of the bill for your reference.

Thank you for your attention and for your consideration of this important legislation.

## Proposed Revisions to SB 82

By: Dr. Randall Todd, Nevada State Health Division  
To: Committee on Human Resources and Facilities, Room 4100  
Date: February 26, 2003, at 1:30 p.m.

### SB 82, Section 8

Add (Subsection 4) Page 4 Lines 11-14:

4. Nothing in this act shall be construed or interpreted to in any way interfere with the ability of a hospital or medical facility to apply infection control practices that are designed to prevent or limit the transmission of communicable diseases within their own facilities.

### SB 82, Section 14

Add (before Subsection 1) Page 7 Lines 38-44:

A proceeding for an involuntary court-ordered isolation or quarantine of any person in this state may be commenced by a health authority filing a petition with the clerk of the district court of the county where the person [who] is to be isolated or quarantined [resides]. The petition may be pled in the alternative for both isolation and quarantine, if required by developing or changing facts, and must be accompanied:

### SB 82, Section 19

Add (to Subsection 2) Page 10 Lines 41-43:

2. The entire expense of proceedings for involuntary court-ordered isolation or quarantine shall be paid by the county in which the application is filed[, except that when the person to be admitted last resided in another county of this state the expense must be charged to and payable by such county of residence].