

## CHAPTER 143

## COMMUNICABLE DISEASES

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**143.01 Definitions.** In this chapter:

(1) "Local health officer" means a health officer designated under s. 140.09, 141.01 (9), 141.015, 141.02 or 141.04 or a qualified public health professional designated under s. 141.01 (1m), (3) (a) or (10).

NOTE: Sub. (1) is shown as affected by 1985 Wis. Act 29, s. 1931k, eff. 7-1-87. Prior to that date, sub. (1), as affected by Act 29, s. 1931h reads:

"(1) 'Local health officer' means a health officer designated under s. 140.09, 141.01 (9), 141.015, 141.02, 141.04 or a qualified public health professional designated under s. 141.01 (1m), (3) (a) or (10), except that in a county identified under s. 141.01 (1r) (a) the 'local health officer' means only the person designated by the county under s. 141.01 (1r) (a).

(2) "Municipality" means any city, village or town.

History: 1981 c. 291; 1981 c. 391 s. 210; 1985 a. 29.

**143.02 Powers of department.** (1) The department may establish systems of disease surveillance and inspection to ascertain the presence of any communicable disease. Any agent of the department may, with a special inspection warrant issued under s. 66.122, enter any building, vessel or conveyance to inspect the same and remove therefrom any person affected by a communicable disease. For this purpose, the agent may require the person in charge of the vessel or conveyance, other than a railway car, to stop the same at any place and may require the conductor of any railway train to stop the train at any station or upon any sidetrack, for such time as may be necessary.

(2) In an emergency, the department may provide those sick with a communicable disease with medical aid and temporary hospital accommodation.

(3) The department may close schools and forbid public gatherings in schools, churches, and other places to control outbreaks and epidemics.

(4) The department may adopt and enforce rules or issue orders for guarding against the introduction of any communicable disease into the state, for the control and suppression of communicable diseases, for the quarantine and disinfection of persons, localities and things infected or suspected of being infected by a communicable disease and for the sanitary care of jails, state prisons, mental health institutions, schools, hotels and public buildings and connected premises. Any rule or order may be made applicable to the whole or any specified part of the state, or to any vessel or other conveyance. Rules of general application shall be adopted under ch. 227. Orders may be made for any city, village or county by service upon the local health officer. Rules or orders adopted or issued under this subsection supersede conflicting local rules or ordinances.

(5) If any public officer or employe or any person in charge of any building, vessel, conveyance, jail, state prison, mental health institution or school fails to comply with a rule or order adopted or issued under sub. (4), the department may appoint an agent to execute its rules or orders. Expenses

which an agent incurs shall be paid by the unit of government that employs the person or of which the public officer is a member. If the building, vessel, conveyance, mental health institution or school is privately owned the state shall pay the expenses incurred.

(6) The department may authorize and implement all emergency measures necessary to control communicable diseases.

History: 1981 c. 291.

**143.03 Duties of local health officers.** (1) Every local health officer, upon the appearance of any communicable disease in his or her territory, shall immediately investigate all the circumstances and make a full report to the appropriate governing body and also to the department. The local health officer shall promptly take all measures necessary to prevent, suppress and control communicable diseases, and shall report to the appropriate governing body the progress of the communicable diseases and the measures used against them, as needed to keep the appropriate governing body fully informed, or at such intervals as the secretary may direct. The local health officer may inspect schools and other public buildings within his or her jurisdiction as needed to determine whether the buildings are kept in a sanitary condition.

(2) Local health officers may do what is reasonable and necessary for the prevention and suppression of disease; may forbid public gatherings when deemed necessary to control outbreaks or epidemics and shall advise the department of measures taken.

(3) If the local authorities fail to enforce the communicable disease statutes and rules, the department shall take charge, and expenses thus incurred shall be paid by the county or municipality.

(4) No person may interfere with the investigation under this chapter of any place or its occupants by local health officers or their assistants.

History: 1981 c. 291.

**143.04 Reports of cases.** (1) Any person licensed under ch. 441 or 448 knowing or having reason to know that a person treated or visited by him or her has a communicable disease, or having a communicable disease, has died, shall report the appearance of the communicable disease or the death to the local health officer. The local health officer shall report this information to the department or shall direct the licensee to report to the department. Any licensee directed to report shall submit this information to the department.

(2) Each laboratory shall report as prescribed by the department those specimen results that the department finds necessary for the surveillance, control, diagnosis and prevention of communicable diseases.

(3) Anyone having knowledge or reason to believe that any person has a communicable disease shall report the facts to the local health officer.

(4) Reports under subs. (1) and (2) shall state so far as known the name, sex, age and residence of the person, the communicable disease and other facts the department or local health officer requires. Report forms may be furnished by the department and distributed by the local health officer.

(5) All reports shall be made within 24 hours, unless otherwise specified by the department, either by telephone, telegraph, mail or by deposit at the office of the local health officer.

(6) Any local health officer, upon receiving a report, shall cause a permanent record of the report to be made and upon demand of the department transmit the original or a copy to the department, together with other information the department requires.

(7) When an outbreak or epidemic occurs, the local health officer shall immediately report to the department, and shall at all times keep the department informed of the prevalence of the communicable diseases in the locality in the manner and with the facts the department requires.

(8) A list of communicable diseases shall be displayed in each physician's office or clinic and in each health care institution, school and correctional facility. The list shall be printed and furnished without charge by the department.

(9) Any person licensed under ch. 441 or 448 shall use ordinary skill in determining the presence of communicable diseases. If there is a dispute regarding disease determination, if the disease may have potential public health significance or if more extensive laboratory tests will aid, the local health officer shall order the tests made by the state laboratory of hygiene or by a laboratory certified under s. 143.15.

(11) If a violation of this section is reported to a district attorney by a local health officer or by the department, the district attorney shall forthwith prosecute the proper action, and upon request of the department, the attorney general shall assist.

History: 1971 c. 164 s. 91; 1981 c. 291

**143.05 Isolation and quarantine.** (1) The department or the local health officer acting on behalf of the department may require isolation of the patient, quarantine of contacts, concurrent and terminal disinfection, or modified forms of these procedures as may be necessary and which are determined by the department by rule.

(3) If a local health officer suspects or is informed of the existence of any communicable disease, the officer shall at once investigate and make or cause such examinations to be made as are necessary. The diagnostic report of a physician, the notification or confirmatory report of a parent or caretaker of the patient, or a reasonable belief in the existence of a communicable disease requires the health officer immediately to quarantine, isolate, require restrictions or take other communicable disease control measures in the manner, upon the persons and for the time the department provides in its rules. If the local health officer is not a physician, he or she shall employ one to aid the local health officer as speedily as possible where there is reasonable doubt or disagreement in diagnosis and where advice is needed. The local health officer shall investigate evasion of the laws and rules concerning communicable disease and shall act to protect the public.

(4) If deemed necessary by the department or a local health officer for a particular communicable disease, all persons except the local health officer, his or her representative, attending physicians and nurses, members of the clergy, the members of the immediate family and any other person

having a special written permit from the local health officer are forbidden to be in direct contact with the patient.

(5) The local health officer shall employ as many persons as are necessary to execute his or her orders and properly guard any place if quarantine or other restrictions on communicable disease are violated or intent to violate is manifested. These persons shall be sworn in as quarantine guards, shall have police powers, and may use all necessary means to enforce the state laws for the prevention and control of communicable diseases, or the orders and rules of the department or any local health officer.

(6) (a) When the local health officer deems it necessary that a person be quarantined or otherwise restricted in a separate place, the officer shall remove the person, if it can be done without danger to the person's health, to this place.

(b) When a person confined in a jail, state prison, mental health institute or other public place of detention has a disease which the local health officer or the director of health at the institution deems dangerous to the health of other residents or the neighborhood, the local health officer or the director of health at the institution shall order in writing the removal of the person to a hospital or other place of safety, there to be provided for and securely kept. Upon recovery the person shall be returned; and if the person was committed by a court or under process the removal order or a copy shall be returned by the local health officer to the committing court officer.

(10) (a) Expenses for necessary medical care, food and other articles needed for the care of the infected person shall be charged against the person or whoever is liable for the person's support.

(b) The county or municipality in which a person with a communicable disease resides is liable for the following costs accruing under this section, unless the costs are payable through 3rd-party liability or through any benefit system:

1. The expense of employing guards under sub. (5).
2. The expense of maintaining quarantine and enforcing isolation of the quarantined area.
3. The expense of conducting examinations and tests for disease carriers made under the direction of the local health officer.
4. The expense of care provided under par. (a) to any dependent person, as defined in s. 49.01 (2).

History: 1981 c. 291; 1983 a. 189 s. 329 (19).

**143.06 Tuberculosis.** (1) Tuberculosis is a communicable disease and is subject to the reporting requirements specified in s. 143.04. Any laboratory that performs a test for tuberculosis shall report all positive results to the local health officer and to the department.

(4) Any court of record may commit a person infected with tuberculosis to a place that will provide proper care and prevent spread of the disease if the disease is diagnosed by a medical, laboratory or X-ray examination and if the person fails to comply with this chapter or with rules of the department concerning tuberculosis. If the local health officer or any resident of the municipality in which an alleged violation of this subsection occurs petitions the court and states the facts of the alleged violation, the court shall summon the person infected with tuberculosis to appear in court on a date at least 48 hours after service of the summons. The court may order the person discharged. If the administrative officer of the institution has good cause to believe that a person who is committed may leave without a court order, the officer may restrain the person from leaving. The administrative officer may segregate any person who is committed, as needed.

(5) Upon report of any person, the local health officer shall at once investigate and make and enforce the necessary orders.

(7) For the purpose of this section persons in charge of common carriers shall have police powers.

History: 1971 c. 158; 1975 c. 383 s. 4; 1975 c. 421; 1981 c. 291.

**143.07 Sexually transmitted disease.** (1) In this section, "sexually transmitted disease" means syphilis, gonorrhea and other diseases the department includes by rule.

(1m) Any person infected with a sexually transmitted disease in a communicable form is a menace to the public health. A physician called to attend a person infected with any form of sexually transmitted disease, as specified by the department by rule, shall report the disease to the local health officer and to the department in the manner directed by the department in writing on forms furnished by the department. A physician may treat a minor infected with a sexually transmitted disease or examine and diagnose a minor for the presence of such a disease without obtaining the consent of the minor's parents or guardian. The physician shall incur no civil liability solely by reason of the lack of consent of the minor's parents or guardian.

(2) An officer of the department or a local health officer having knowledge of any reported or reasonably suspected case of a sexually transmitted disease for which no appropriate treatment is being administered shall investigate or cause the case to be investigated as necessary. If, following a request of an officer of the department or a local health officer, a person reasonably suspected of being infected with a sexually transmitted disease refuses or neglects examination by a physician or treatment, an officer of the department or a local health officer may proceed to have the person committed under sub. (5) to an institution or system of care for examination, treatment or observation.

(4) If a person infected with a sexually transmitted disease ceases or refuses treatment before reaching what in the physician's opinion is the noncommunicable stage, the physician shall notify the department. The department shall without delay take the necessary steps to have the person committed for treatment or observation under sub. (5), or shall notify the local health officer to take these steps.

(5) Any court of record may commit a person infected with a sexually transmitted disease to any institution or may require the person to undergo a system of care for examination, treatment or observation if the person ceases or refuses examination, treatment or observation under the supervision of a physician. The court shall summon the person to appear on a date at least 48 hours after service if an officer of the department or a local health officer petitions the court and states the facts authorizing commitment. If the person fails to appear or fails to accept commitment without reasonable cause, the court may cite the person for contempt. The court may issue a warrant and may direct the sheriff, any constable or any police officer of the county immediately to arrest the person and bring the person to court if the court finds that a summons will be ineffectual. The court shall hear the matter of commitment summarily. Commitment under this subsection continues until the disease is no longer communicable or until other provisions are made for treatment that satisfy the department. The certificate of the petitioning officer is prima facie evidence that the disease is no longer communicable or that satisfactory provisions for treatment have been made.

(7) Reports, examinations and inspections and all records concerning sexually transmitted diseases are confidential and not open to public inspection, and shall not be divulged except as may be necessary for the preservation of the public

health or in the course of commitment proceedings under sub. (5). If a physician has reported a case of sexually transmitted disease to the department under sub. (4), information regarding the presence of the disease and treatment is not privileged when the patient or physician is called upon to testify to the facts before any court of record.

(9) The department shall prepare for free distribution upon request to state residents, information and instructions concerning sexually transmitted diseases.

(10) The state laboratory of hygiene shall examine specimens for the diagnosis of sexually transmitted diseases for any physician or local health officer in the state, and shall report the positive results of the examinations to the local health officer and to the department. All laboratories performing tests for sexually transmitted diseases shall report all positive results to the local health officer and to the department, with the name of the physician to whom reported.

(11) In each county with an incidence of gonorrhea or syphilis exceeding the statewide average per person, a program to diagnose and treat sexually transmitted diseases at no cost to the patient is required. The county board of supervisors is responsible for ensuring that such a program exists, but is only required to establish its own program if no other public or private program is operating. The department shall compile statistics indicating the incidence of gonorrhea and syphilis per person on a statewide basis.

History: 1971 c. 42, 125; 1973 c. 90; 1975 c. 6; 1975 c. 383 s. 4; 1975 c. 421; 1981 c. 291.

**143.08 Handling foods.** No person in charge of any public eating place or other establishment where food products to be consumed by others are handled may knowingly employ any person handling food products who has a disease in a form that is communicable by food handling. If required by the local health officer or any officer of the department for the purposes of an investigation, any person who is employed in the handling of foods or is suspected of having a disease in a form that is communicable by food handling shall submit to an examination by the officer or by a physician designated by the officer. The expense of the examination, if any, shall be paid by the person examined. Any person knowingly infected with a disease in a form that is communicable by food handling who handles food products to be consumed by others and any persons knowingly employing or permitting such a person to handle food products to be consumed by others shall be punished as provided by s. 143.11.

History: 1981 c. 291.

**143.10 Communicable diseases; suspected cases; protection of public.** No person who is knowingly infected with a communicable disease may wilfully violate the recommendations of the local health officer or subject others to danger of contracting the disease. No person may knowingly and wilfully take, aid in taking, advise or cause to be taken, a person who is infected or is suspected of being infected with a communicable disease into any public place or conveyance where the infected person would expose any other person to danger of contracting the disease.

History: 1981 c. 291.

**143.11 Violation of law relating to health.** Any person who wilfully violates or obstructs or hinders the execution of any state, county or municipal law, ordinance, order or rule issued under this chapter and relating to the public health, for which no other penalty is prescribed, shall be imprisoned not more than 30 days or fined not to exceed \$500 or both.

History: 1981 c. 291.

**143.12 Communicable diseases; schools; duties of teachers, parents, officers.** (1) If a teacher, school nurse or principal of any school or day care center knows or suspects that a communicable disease is present in the school or center, he or she shall at once notify the local health officer.

(6) Any teacher, school nurse or principal may send home pupils who are suspected of having a communicable disease or any other disease the department specifies by rule. Any teacher, school nurse or principal who sends a pupil home shall immediately notify the parents of the pupil of the action and the reasons for the action. A teacher who sends a pupil home shall also notify the principal of the action and the reasons for the action.

History: 1981 c. 291.

**143.14 Typhoid carriers; commitment; nonresidents.** Any person declared by the department to be a typhoid carrier as determined by epidemiologic or laboratory tests is a menace to the public health and shall conduct himself or herself in the manner required by the department. Upon proof of violation of the requirements of the department, the person may be committed by the court to any institution where proper care and maintenance can be provided. The period of commitment shall continue until the department, through its proper officer or the committing court, shall consent to discharge. Expense of maintenance during commitment shall be borne by the person committed, or if the person is without sufficient funds, by the county from which he or she was committed unless the expense is payable through 3rd-party liability or through any benefit system.

History: 1975 c. 383 s. 4; 1981 c. 291.

**143.15 Laboratories, approval of.** (1) It is the purpose of this section to assure the reliability and quality of manual and automated laboratory screening diagnostic examinations made for the protection of the health of the public.

(2) Any laboratory, except physician office laboratories serving not more than 2 physicians, established and operated to perform bacteriological, biological, serological, chemical, hematological, immunological, cytological or microscopic examinations of specimens from suspected cases of disease or for the examination of milk, water and food products, for the purpose of protecting the health of the public shall apply to the department for an evaluation of the examinations and appropriate certification. The laboratory may substitute an equivalent evaluation in place of the departmental evaluation, if the equivalent evaluation meets departmental standards under sub. (5).

(3) The department shall designate which laboratory examinations it deems necessary for the protection of the health of the public. Substantial failure of any laboratory to show evidence of quality control procedures, sufficient to comply with current standards and practice as prescribed by the department, shall result in denial or revocation of the certificate of approval. The department shall provide for consultation on laboratory methods and procedures.

(4) The department, after conducting an evaluation or approving an evaluation meeting departmental standards under sub. (5) for each specialty area, and after receiving a fee for each specialty area by the laboratory, shall issue an appropriate certificate of approval to the laboratory, covering those examinations which have met the minimum standards established by the department. A certificate of approval shall be valid for 12 months from the date of issue but shall be revoked by the department if the minimum standards established by the department for certification are not met within 2 successive evaluations. The evaluations must occur

within 60 days of the annual renewal of the certificate of approval.

(5) The department shall establish uniform minimum standards to be used in the evaluation and certification of laboratory examinations. The department shall establish standards by rule for the type of equivalent evaluations that a laboratory may use in place of departmental evaluations. The department shall submit any rules proposed under this subsection which affect the laboratory certification program under s. 144.95 to the department of natural resources and to the state laboratory of hygiene for review and comment. These rules may not take effect unless they are approved by the department of natural resources within 6 months after submission.

(6) Laboratories required to apply to the department under sub. (2) shall not operate without a certificate of approval. Any lab which operates without a certificate of approval shall be fined not less than \$100 nor more than \$1,000. Each day such violation continues shall constitute a separate offense.

(7) The department shall promulgate rules establishing a fee schedule to offset the cost of the certification of laboratories and the collection of fees.

(8) The department shall enter into a memorandum of understanding with the department of natural resources setting forth the responsibilities of each department in administering the laboratory certification programs under sub. (5) and s. 144.95. The memorandum of understanding shall include measures to be taken by each department to avoid duplication of application and compliance procedures for laboratory certification.

(9) The department shall recognize the certification or registration of a laboratory by the department of natural resources under s. 144.95 and shall accept the results of any test conducted by a laboratory certified or registered to conduct that category of test under that section.

History: 1975 c. 39, 198, 224; 1977 c. 29; 1979 c. 34; 1981 c. 291; 1983 a. 410.

**143.16 Physical exams for teachers.** The governing body of each private or parochial school enrolling pupils in any grades from one to 12 and of every privately supported institution of higher education in the state granting a certificate, diploma or degree shall, as a condition of entering or continuing such employment, require a physical examination, including a chest X-ray or tuberculin test, of every employe of the institution except in institutions of higher learning employes working less than 60 days in any school year shall be exempt; except that a governing body may, in the case of a new employe, permit the employe to submit proof of an examination, chest X-ray or tuberculin test, which complies with this section taken within the past 90 days in lieu of requiring such examination, X-ray or test. If the reaction to the tuberculin test is positive then a chest X-ray shall be required. Additional physical examinations shall be required thereafter at intervals determined by the governing body. The physician making the examination shall prepare a report of the examination upon a standard form prescribed by the department. The report shall be retained in the physician's files and he or she shall make confidential recommendations therefrom to the governing body and to the employe on a form prescribed by the department. The recommendation form shall contain space for a certificate that the person examined is free from tuberculosis in a communicable form. Not more than 30 days after the opening of each semester or similar period, each institution shall file with the department a certificate of compliance on a

form satisfactory to the department stating that they have complied with this section.

History: 1979 c. 221.

**143.17 Health examinations.** (1) The provisions of sub. (2), relating to periodic physical examinations, shall apply to the vocational, technical and adult education schools; and to the university of Wisconsin system, except that their classified civil service personnel shall not be required to submit to general physical examinations but shall submit to chest X-ray or tuberculin tests as required in sub. (2).

(2) The governing body shall, as a condition of entering or continuing employment, require a physical examination including a chest X-ray or tuberculin test, of every person employed for 60 days or more in any fiscal year by the governing body; except that the governing body may, in the case of a new employe, permit the employe to submit proof of an examination, chest X-ray or tuberculin test which complies with this section taken within the past 90 days in lieu of requiring such examination, X-ray or test. If the reaction to the tuberculin test is positive then a chest X-ray shall be required. Additional physical examinations shall be required thereafter at intervals determined by the governing body. The employe shall be examined by a licensed physician in the employ of or under contract with the institution. If no such physician is employed or under contract, the examination shall be made by any licensed physician selected by the employe. Such physical examinations, chest X-rays or tuberculin tests shall not be required of any such employe who files with the governing body an affidavit setting forth that he or she depends exclusively upon prayer or spiritual means for healing in accordance with the teachings of a bona fide

religious sect, denomination or organization and that he or she is to the best of his or her knowledge and belief in good health and that he or she claims exemption from health examination on such grounds. Notwithstanding the filing of such affidavit if there is reasonable cause to believe that the employe is suffering from an illness detrimental to the health of the pupils, the governing body may require such health examination of the employe sufficient to indicate whether or not the employe is suffering from such an illness. No employe may be discriminated against by reason of his or her filing the aforementioned affidavit. The physician making the examination shall prepare a report of his or her examination upon a standard form prepared by the department and the department of public instruction. The report shall be retained in the physician's files and he or she shall make confidential recommendations therefrom to the governing body and to the employe on a form prepared by the department and the department of public instruction. The recommendation form shall contain space for a certificate that the person is free from tuberculosis in a communicable form. The cost of the examinations, including X-rays and tuberculin tests, shall be paid by the individual employe, but the governing body may arrange for the use of its facilities and qualified professional staff to carry out this function with or without charge to the employe. Not more than 30 days after the opening of each semester or similar period, each institution shall file with the department a certificate of compliance, on a form satisfactory to the department stating that they have complied with this section.

History: 1971 c. 154; 1975 c. 189; 1979 c. 221.