

# Overview of the National HAI Surveillance System in the Republic of Korea

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Korea Disease Control and Prevention Agency



# Overview of Disease Surveillance in the ROK

- All Koreans even including doctors who identify patients suspected of an infectious disease are required to report them to a public health center (local governments).
- The public health center shares the reported cases with KDCA and other medical institutions (if needed)
- Public Health centers are responsible for epidemiological investigations of cases reported



# HAI Surveillance in the RoK

- Surveillance of infectious disease outbreaks is mandatory according to a relevant law.
- Outbreaks of the following HAIs must be under surveillance pursuant to the relevant law.

Surveillance Class (1~4)	Infectious Disease	Surveillance Rules
2 (Mandatory Surveillance)	VRSA, CRE	must be reported to a public health center within 24 hours after a healthcare provider confirms a probable case
4 (Sentinel Surveillance)	VRE, MRSA, MRPA, MRAB	once the cases break out, designated medical institutions report them to a public health center on a regular basis



# Roles

- (Medical institutions) Report cases that have a pathogen once they are confirmed through systems.
- (Public health center) Confirm the cases reported by medical institutions and report them to local governments (City/Province) and fill out a case investigation form
- (City/Province) Verify and supplement reports and case investigation forms and report them to KDCA
- (KDCA)
  - Verify pathogen testing and approve reports
  - Monitor disease outbreak trends and forecast and control mass outbreaks based on the number of reported cases
  - Depending on the scale of transmission, visit outbreak sites and respond (identify causes and take action)



# Patient Triage

- First Triage
  - (Patient) Bacterial infection confirmed by blood test
  - (pathogen carrier) Bacterial infection identified in a sample\* other than a blood
- Continuous Management : Re-report
  - Re-report any changes in other types of bacteria by CRE patients
  - Re-report if enzymes identification or other types of enzymes have been identified by CRE patients
- CRE cases reported multiple times upon isolated strains and enzymes

\* sputum, urine, feces(rectal swab), skins, scars, abscess, cerebrospinal fluid, body fluid, etc.



# Surveillance Report Form

## 1) Personal Information of the patient

: Name, ID#, Sex, Telephone number#, Address, Job

## 2) Information on infectious disease

: Kind, Date of testing, Test result, etc.

## 3) Information on a medical institution reporting the case

: Name, Address, Telephone number#, Physician name#, etc.

## 3) Additional Information of the patient

: Nationality, International travel records, etc.

■ 감염병의 예방 및 관리에 관한 법률 시행규칙 [별지 제1호의3서식] <개정 2022. 5. 4.>

### 감염병 발생 신고서

※ 뒤쪽의 신고방법 및 작성방법에 관한 안내를 읽고 작성하시기 바라며, [ ]에는 해당되는 곳에 √표를 합니다. (앞쪽)

수신자: [ ] 질병관리청장 [ ] 보건소장

<b>[환자의 인적사항]</b>					
성명	주민(외국인)등록번호				
(만 19세 이하인 경우 보호자 성명)	성별 [ ] 남 [ ] 여				
전화번호	휴대전화번호				
주소					
[ ] 거주지 불명 [ ] 신원 미상	직업				
<b>[감염병명]</b>					
<b>[감염병 발생정보]</b>					
발병일	년 월 일	진단일	년 월 일	신고일	년 월 일
확진 검사결과 [ ] 양성 [ ] 음성 [ ] 검사 진행 중 [ ] 검사 미 실시					
입원여부 [ ] 외래 [ ] 입원 [ ] 그 밖의 경우					
환자 등 분류 [ ] 환자 [ ] 의사환자 [ ] 병원체보유자 [ ] 검사 거부자 [ ] 그 밖의 경우					
비고(특이 사항)					
사망여부 [ ] 생존 [ ] 사망					
<b>[신고의료기관 등]</b>					
요양기관번호			요양기관명		
주소			전화번호		
진단 의사 성명 (서명 또는 날인)			신고기관장 성명		
<b>[보건소 보고정보]</b>					
국적(외국인만 해당합니다)					
환자의 소속기관명			환자의 소속기관 주소		
추정 감염 지역 [ ] 국내 [ ] 국외(국가명: ) / 체류기간: ~ / 입국일: 년 월 일					

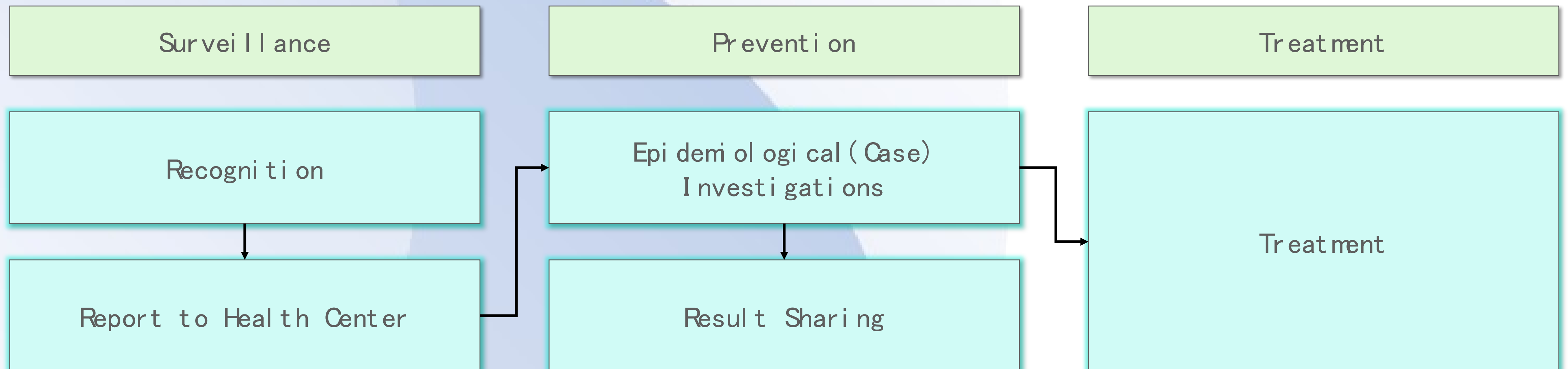
210mm×297mm[백상지(80g/㎡) 또는 중질지(80g/㎡)]





# HAI Patient Control

- Surveillance and epidemiological investigations are constantly controlled and managed by public health
- Information on progress of patient control, including treatment, is consistently reported and collected by medical institutions

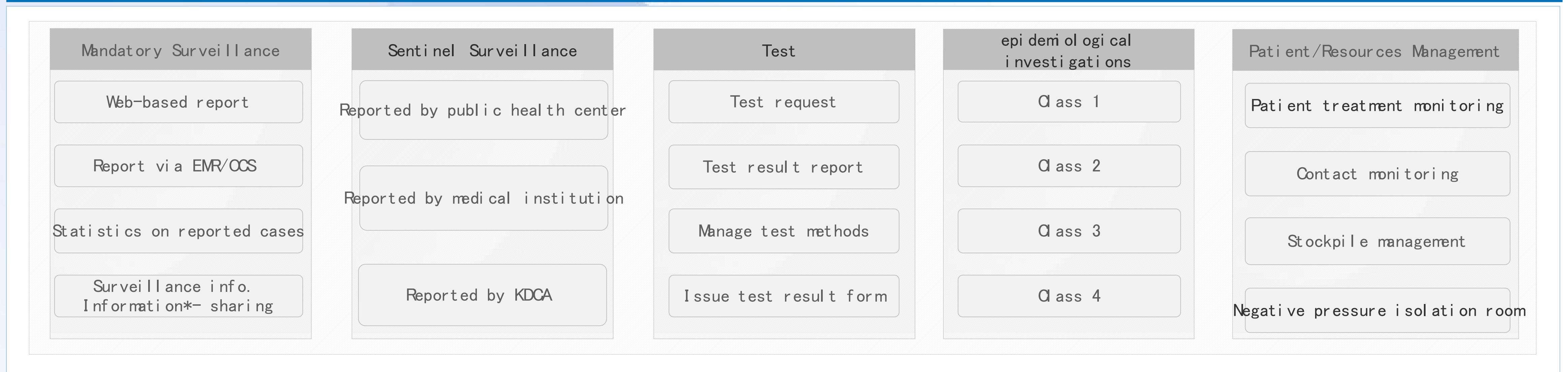




# About System (Function)

- Being operated by KDCA to computerize infectious disease response from prevention, control and treatment

## Disease Management Integrated Information System(Function)







# Way Forward

- Pursuing re-establishment of Disease Control Integrated Information System
  - Minimize a heavy workload on the system in case of mass outbreaks of infectious diseases
  - Integrate and manage entry screening system and infectious disease system and exchange information between quarantine stations and local government
  - Establish a new platform to use collected information for research and analysis

# Thank you

## Contact

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