

**SCHOOL DISTRICT OF WAUZKA-STEUBEN**  
**COMMUNICABLE DISEASE CONTROL PROCEDURES**

**Educational and Preventive Measures**

1. The District, under the primary administrative responsibility and direction of the Wauzeka-Steuben School District, will ensure that it obtains and appropriately retains records of all immunizations (or a related waiver) and health examinations/tests (e.g., tuberculin screening or test results) required of students and staff by law and Board policy.
  - a. The Wauzeka-Steuben School District shall periodically review the District's student immunization procedures and evaluate school-level compliance with relevant state statutes (including Chapter 252) and regulations (including Chapter DHS 144).
  - b. The Wauzeka-Steuben School District administration shall have primary responsibility for ensuring that District employees complete all required physical examinations (including tuberculin screening or testing, as applicable).
2. The Wauzeka-Steuben School District shall post or verify the posting of the Department of Health Services' Wisconsin Childhood Communicable Diseases Chart at each school in at least the nurse/health office or other primary station/area that is designated for student health services. The chart is a non-comprehensive reference and general guide for school staff that includes information on selected diseases, including signs and symptoms, incubation periods, periods of communicability, modes of transmission, and control measures/public health responses. (Section PI 8.01(2)(g)5 requires school districts to provide an appropriate and readily-accessible space for the provision of emergency nursing services to students.)
3. First aid kits and other supplies and equipment appropriate for reducing the risk of transmission of communicable diseases in the school environment, as determined in consultation with public health officials and/or a health care professional serving the District, will be provided in each school building (Section PI 8.01(2)(g)5 requires school districts to provide appropriate and readily-accessible equipment and supplies for the provision of emergency nursing services to students.)
4. The district is able to identify the elements of the health curriculum that meet any statements about the curricular content. General content standards for the health education curriculum can be found in sections 118.01(2)(d) and 115.35(1) of the state statutes. See also PI 8.01(2)(j)1.
5. The Wauzeka-Steuben School District shall ensure that student handbooks or other school-to-home communications inform parents and guardians of general expectations and standards for keeping students who are sick, or who are known or believed to be at risk of carrying or spreading a communicable disease, home from school (including avoiding in-person participation in school activities). The district is able to identify specific communications that align with the information distribution commitments stated in this paragraph.
6. The Wauzeka-Steuben School District shall ensure that the District provides parents and guardians of students in the 6<sup>th</sup> grade with information about meningococcal disease as mandated by state law.

7. The nurse serving the school shall make general information regarding suppression and control of communicable diseases available to all employees. Such general information may be supplemented by additional role-based training and/or by the periodic distribution of other role-based informational materials. The Wauzeka-Steuben School District shall be responsible for defining the audience, content, and frequency for any such additional role-based training opportunities or informational initiatives.
8. The exposure control plan and training requirements referenced in this paragraph reflect mandates established by the U.S. Occupational Safety and Health Administration. Those employees who are occupationally exposed to blood or other potentially infectious materials in the performance of their duties shall receive special training upon initial employment and annually thereafter. "Occupationally exposed" means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. Such training shall incorporate applicable provisions of the District's Exposure Control (Bloodborne Pathogens) Plan.
  - a. The administration may elect to provide training on the Exposure Control Plan to additional employees or other persons who are not considered to have occupational exposure.
  - b. All employees who receive such training are expected to adhere to the Exposure Control Plan and the procedures covered in the training, including but not limited to complying with procedures that address exposure prevention/mitigation and the procedures to follow in the event of an exposure incident in a school or other work-related setting, including, to the extent practical, District-related activities occurring off District premises.

### **Reporting Communicable Disease Information and Exposure Incidents**

1. Intra-District Reporting:
  - a. Any District employee, as well as any non-employee contracted service provider who works in any school or directly with students, who knows or suspects that a student, District employee, or other person who has been present in a school or other District facility has a communicable disease or that a communicable disease may be otherwise present in any such setting shall immediately report the information to the school principal or his/her designee. Such information may alternatively be reported to the Wauzeka-Steuben School District. Other persons, including any parent, student, school volunteer, or visitor who knows or suspects that a communicable disease may be present in a school setting or in any other District facility, are strongly encouraged to report the information in the same manner as is outlined for school employees. Upon receiving a report under this paragraph, the relevant District official shall:
    - 1) Promptly evaluate the relevant information for purposes of determining an appropriate response. The relevant official should seek clarifying information (e.g., from the subject of the report, a student's parent or guardian, etc.) and confer with relevant subject matter experts (e.g., medical professionals, public health officials, etc.) as needed and to the extent circumstances permit.
    - 2) If the District Administrator has not already been notified, notify the District Administrator of the situation no later than the point at which a decision is made to pursue external reporting (see below) or the point at which the official determines there is a reasonable probability that the District will need to formulate an incident-specific response.

- b. Whenever any occupationally exposed employee, as defined above, or other person who has received training in the District’s Exposure Control Plan has an actual incident involving exposure to blood or other potentially infectious agents or materials, the person is expected to report the incident to relevant supervisors or administrators in accordance with the procedures outlined in the Exposure Control Plan.
2. Reports to Public Health Officials:
    - a. Pursuant to state law and as further outlined in this section, a teacher, school nurse, or principal of any school (or childcare center) who knows or suspects that a communicable disease is present in a school (or center) is required to immediately notify a local public health officer. By policy, the District extends the external reporting responsibilities outlined in this section to the following additional positions: the District Administrator, District Principal
      - 1) While a person who is subject to this reporting duty may consult with others to determine the need to make an external report and to coordinate the District’s report, such consultation and coordination shall not delay the making of a timely report once a reportable situation has been identified.
      - 2) The District encourages staff to attempt to coordinate such reports through a nurse serving the school or through the school principal, but such coordination may not be practical in all situations. No staff member will be disciplined for making a direct external report provided that the staff member also informs appropriate administrators within the District of the situation and the report.
      - 3) Any staff member who makes an external report shall ensure that at least the District Administrator and any relevant school principal are promptly notified of the submission of the report.
    - b. All known or suspected cases of a vaccine-preventable disease covered by a student vaccination mandate (i.e., as identified in section 252.04(2) of the state statutes and/or in Chapter DHS 144 of the Wisconsin Administrative Code) which occur among students or staff shall be reported immediately by telephone to the local health department.
    - c. In addition to the reports made by telephone under the preceding paragraph, the communicable diseases that are listed by the Department of Health Services in the categories below are also subject to external reporting requirements (see Appendix A to Chapter DHS 145; the lists include some overlap with diseases covered by the vaccine mandates that apply to students):
      - Category I diseases are of urgent public health importance. If not already reported by telephone as a vaccine-preventable disease, as described above, these diseases must be reported immediately by telephone to the local public health officer or to the local health officer’s designee upon identification of a case or a suspected case. In addition to the immediate telephone report, a written report must be made on the required reporting form within 24 hours. Examples of such reportable diseases include, but are not limited to measles, rabies (human, animal), hepatitis A, tuberculosis, and pertussis (whooping cough). This category also includes any confirmed or suspected outbreaks of any foodborne or waterborne disease, occupationally-related disease, or other acute illness regardless of whether the cause or source is known.
      - Category II diseases (in addition to making a telephone report for any disease covered by a student vaccination mandate that is in this category) must be reported by fax, mail, or electronic reporting to the local public health officer or to the local health officer’s

designee on the required reporting form or by other means within 72 hours of identification of a case or suspected case. Examples of such reportable diseases include, but are not limited to lyme disease, meningitis (bacterial), mumps, salmonellosis, sexually transmitted diseases (e.g., gonorrhea, chlamydia), tetanus, hepatitis B, C, D or E, varicella (chicken pox), and influenza-associated hospitalization, influenza-associated pediatric death or influenza A virus infection of any novel subtypes.

- *Category III* diseases include human immunodeficiency virus (HIV) infection and must be reported to the state epidemiologist on a Wisconsin Human Immunodeficiency Virus Infection Case Report Form (DHS F-44338) or by other means within 72 hours after identification of a case or suspected case.
- d. To the extent public health officials establish or modify external reporting procedures or expectations in response to a public health emergency (e.g., via a specific public health order, emergency regulation, or other similar directive), such additions or modifications shall supplement the expectations found in these procedures and, in the event of any conflict, supersede these procedures.
- e. Nuisance diseases not addressed in the categories above, such as head lice, are not required to be reported to the local public health officer. However, a school nurse or school principal or their designee may contact public health officials for information about the prevention, control, and treatment of such diseases and request their involvement in addressing particular outbreaks.

### **Exclusion of Students from School**

1. Students in any of the following situations shall be granted an excused absence from school until their presence, as ultimately determined by the District or any applicable public health order or directive, no longer poses an unacceptable threat to the health of themselves or others:
  - a. Any student who has been diagnosed as having a communicable disease that renders them unable to pursue their studies or that poses a significant risk of transmission to others in the school environment, or any student who is in the process of seeking a diagnosis due to a reasonable concern or suspicion of having such a disease.
  - b. Any student who is subject to a public health order that excludes them from school. Notwithstanding the remainder of these procedures, a public health order that requires a student's exclusion from school (including an order excluding non-vaccinated students from school following a substantial outbreak of a vaccine-preventable disease) is sufficient, by itself, to justify an exclusion.
  - c. Any student who is subject to a District-issued directive related to a communicable disease that excludes the student from attending school.
  - d. A student's absence has otherwise been deemed an excused absence for a medical reason under the District's policy governing excused absences.
2. Under state law, any teacher, any nurse who is employed by or directly serving a school, or any school principal may send a student home from school if the student is suspected of having a communicable disease or other disease that the Department of Health Services has specified by rule. The District Administrator is also authorized to make such a determination as a designee on behalf of any school principal. Under District procedures, teachers are normally expected to refer such issues to the school's health staff and/or to the school principal for a decision unless such individuals are unavailable and there is a need for the teacher to make a decision in their absence.

- a. Any District employee or nurse serving a school who sends a student home under the above authority shall immediately notify the student's parent or guardian of the action and the reasons for the action. As soon as practicable, the District shall also notify the student's parent or guardian of any specific terms or conditions on the student's return to school.
  - b. A nurse who sends a student home shall also promptly notify the school principal of the action and the reasons for the action.
  - c. A teacher sends a student home shall also promptly notify the school principal and any nurse serving the school (or, if there is no such nurse, a staff member who regularly works in the student health office) of the action and the reasons for the action.
3. A District decision to exclude a student from school (including any restrictions on a student's participation in school-sponsored activities) beyond the current school day for reasons related to a communicable disease, including the duration and any other terms and conditions of such an exclusion, shall initially be made or expressly approved by District Principal. The District Administrator or his/her administrative-level designee may also make or give final approval to such a decision. Such decisions shall be based on all of the relevant facts and circumstances, giving appropriate consideration to information that may be provided by health care professionals and/or public health officials and to any applicable public health orders or standards that may be established by any authorized public health agency or official(s).
  - a. Any initial determination shall be revisited as soon as reasonably practicable if a student has been initially sent home or excluded from school as a health and safety measure conditioned on the receipt of additional information. Similarly, any initial determinations shall be subject to reconsideration in the event of a material change in circumstances or due to the availability of new, material information. Such reconsideration may be initiated by the District or upon the request of student's parent or guardian.
  - b. If the administrator(s) charged with making a decision regarding exclusion from school determines that the need for exclusion or the appropriate duration or other terms or conditions of an exclusion are unclear or would otherwise benefit from further expert input and analysis, such administrator(s) may refer the situation to a health care team. Members of such a team should be selected based on the specific circumstances, but may include individuals such as the relevant school administrator(s), any nurse serving the school, the District's designated medical advisor, and/or any state or local public health official(s). Based on the individuals who are contacted/involved, District staff shall observe any legal limitations on the disclosure of personally-identifiable information or patient health care records. To the extent the cooperation of the individuals can be obtained, the student and/or the student's parent or guardian and the student's own health care provider(s) may be invited to provide relevant information or otherwise participate in the evaluation of the situation.
4. Any time a decision or order to exclude a student from school due to a communicable disease involves a student with a disability under either Section 504 or under the Individuals with Disabilities Education Act (IDEA), the District employees involved in the matter shall promptly inform the District's lead administrator or coordinator for special education or Section 504, so that appropriate District personnel can evaluate the District's obligations and options regarding any required notices, potential changes in placement, modifications to the student's individualized education program (IEP) or section 504 plan, etc.
5. Any student who is excluded and excused from school attendance due to a communicable disease concern is entitled to at least the same opportunities to make up work as are available to other students with an excused absence. In addition, the student's parent or guardian (or an adult

student) may submit a request for particular program or curriculum modifications. Depending on the duration of the period of exclusion, the District may also affirmatively propose other alternative educational arrangements and opportunities for the student.

6. Following any incident or student absence from school that involves a concern about a communicable disease, the administration may require a statement from a public health official or from a qualified health care provider about a student's suitability to return to school, if the matter warrants such a statement.
7. **Appeals:** An adult student or any minor student's parent or guardian who disagrees with a determination or related action of the District concerning an exclusion from school (including any restrictions on access) under these procedures may appeal such determination or action to the District Administrator or his/her designee at any time prior to the student's return to school without any restrictions. The appeal shall be in writing and shall include the following: (1) a statement of the relevant facts; (2) a statement of the relief requested; and (3) any necessary medical information that has not previously been provided. Once all information necessary for the appeal has been received, the District Administrator or his/her administrative-level designee shall normally render a decision in writing five school days, unless the administrator informs the appealing party of the need and reason for an extension. Such appeals are further subject to the following:
  - a. Complaints involving the identification, evaluation, educational placement, or provision of a free and appropriate public education of a student with a disability will be resolved through the procedures contained in the District's Special Education Policy and Procedure Handbook.
  - b. Any allegation of unlawful student discrimination on the basis of disability or on the basis of any other legally-protected classification may be pursued either following such an appeal or in lieu of such an appeal, as further outlined in the District's student discrimination complaint procedures.
  - c. Except to the extent prohibited by law, a student may be excluded from school and/or any student activity during the pendency of any appeal.

### **Exclusion of Employee from the Workplace**

1. Employees who know or reasonably suspect that they have any communicable disease that would present a danger in a school or other work-related environment are expected to take reasonable measures to avoid the risk of transmission of the disease in such environments, including by at least informing an appropriate supervisor/administrator of any potential risk of the presence or transmission of a communicable disease in such environments and avoiding activities in such environments that pose a risk of transmission (up to and including, if necessary, avoiding being present in such environments) while awaiting further direction. The communicable diseases covered by this expectation include the diseases identified by the Department of Health Services in Appendix A to Chapter DHS 145, and any communicable disease covered by a current and relevant public health order or declared public health emergency. The administration may inform certain contracted service providers or authorized volunteers that the expectations established in this paragraph also apply to such individuals.
  - a. In accordance with state law:
    - 1) Freedom from tuberculosis in a communicable form is a condition of employment for all District employees who come into contact with children or who handle or prepare food for school children.

- 2) School food service employees shall refrain from handling food while they have a disease in a form that is communicable by food handling.
  - b. Employees are expected to follow any applicable public health orders or other applicable emergency orders related to a communicable disease that may be issued by local, state, or federal officials or agencies.
2. Notwithstanding the remainder of these procedures, an order that requires an employee's exclusion from the workplace is sufficient, by itself, to justify the exclusion.
  3. Employees who are suspected of having or who are diagnosed as having a communicable disease that poses a significant health risk to any other person in the school environment or that renders them unable to safely or adequately perform their duties may be excluded from work by the District consistent with District procedures and applicable legal requirements.
    - a. Such decisions shall be made by the District Principal in consultation with one or more appropriate health care professionals (e.g., a nurse serving the District, the District's designated medical advisor, etc.) or public health officials.
  4. Before making a determination that an employee will be involuntarily excluded from work due to a communicable disease concern:
    - a. The employee, if reasonably available, shall be informed of the reasons for the contemplated action.
    - b. Any information the employee may choose to offer regarding his/her condition(s) shall be considered, to the extent time allows.
    - c. Consideration should be given to whether an accommodation that is acceptable to the District could eliminate the health risk to others and/or permit adequate performance. To the extent the employee has a medical condition that constitutes a disability under state or federal law, the District shall evaluate potential accommodations under the applicable legal frameworks for such accommodations. Under no circumstances is the District required to approve an accommodation that results in undue hardship to the District or that would pose a "direct threat" to the health or safety of others.
  5. In determining whether the risk to health or safety of others is significant enough to justify exclusion of the employee from the workplace, the following factors will be considered: (1) the duration of the risk; (2) the nature of severity of the potential harm; (3) the likelihood of potential harm; and (4) any applicable public health regulations, orders, or standards.
  6. The administrator or supervisor charged with making a decision under these procedures to exclude an employee from the workplace, or his/her designee, shall provide written notice of any exclusion to the affected employee(s).
    - a. The employee shall be reasonably informed of the duration of the exclusion and any other terms or conditions of the exclusion and/or reinstatement, and of any changes to such terms or conditions.
    - b. Any initial determination shall be revisited as soon as reasonably practicable if an employee has been initially excluded from work as a health and safety measure conditioned on the receipt of additional information. Similarly, any initial determinations shall be subject to reconsideration in the event of a material change in circumstances or due to the availability of new, material information. Such reconsideration may be initiated by the District or upon the request of the employee.

- c. An employee excluded from the workplace who is not able to fully perform his/her duties may utilize any applicable employment rights or benefits provided under applicable law, existing Board policies, any applicable contract, and/or provisions of the Employee Handbook—which may include (as examples) accrued sick leave, other accrued paid leave (e.g., paid vacation), family and medical leave (if eligible), applying for an unpaid leave of absence, or consideration for reassignment. Except to the extent provided by any such employment rights or benefits, an employee who is excluded from work under these procedures is not guaranteed paid leave or continued or renewed employment.
7. At the District’s discretion, the administration may require a statement from a public health official or from a qualified health care provider, or other documentation acceptable to the District, that confirms an employee’s suitability to return to work after an issue has arisen in connection with a communicable disease. Except in the very limited circumstances authorized under applicable law, the District will not solicit or require an HIV test as a condition of employment for any employee.
8. **Appeals:** A District employee who disputes the determinations or actions of the District concerning his/her exclusion from work under these procedures may appeal the determination or action to the District Administrator. The appeal shall be in writing and shall include the following: (1) a statement of the relevant facts; (2) a statement of the relief requested; and (3) any necessary medical information that has not previously been provided. Once all information necessary for the appeal has been received, the District Administrator shall normally render a decision in writing within five workdays unless the administrator informs the appealing party of the need and reason for an extension. This appeal step, or a further appeal, could be directed to the school board, but such a step is not required and the board may not be well-positioned to evaluate/review these particular decisions due to time sensitivity and other considerations. Such appeals are further subject to the following:
  - a. Except to the extent prohibited by law, an employee may be excluded from work during the pendency of any appeal.
  - b. Any allegation of unlawful employment discrimination on the basis of disability or on the basis of any other legally-protected classification may be pursued either following such an appeal or in lieu of such an appeal, as further outlined in the District’s employment discrimination complaint procedures.

### **Applicability of these Procedures**

1. The procedures, above, governing individualized decisions to exclude students and staff for reasons related to a communicable disease are not intended to apply:
  - a. In the event of the temporary closure of a school or any workplace due to a communicable disease concern; or
  - b. To an exclusion decision that the District Administrator or his/her administrative-level designee determines is necessary to comply with a public health order or directive and that applies to a defined class of employees or a defined group of students, regardless of any case-by-case, individualized circumstances.
2. In the event of a school or workplace closure or any non-individualized exclusion decision, as described above in this section, the District will make reasonable efforts to notify affected persons. In addition, a person affected by a non-individualized exclusion decision may appeal

the decision using the appeal procedure included in these procedures (above) for students or employees, as applicable.

3. Nothing in these procedures prevents the administration from taking lawful and reasonable actions to exclude persons other than students and District employees from District property or District activities in order to address concerns with health and safety and the possible transmission of any communicable disease. For example, the administration may apply the decision-making procedures regarding the exclusion of District employees to contracted service providers and authorized District volunteers who are performing roles that are similar to roles that may otherwise be filled by a District employee.

### **Maintenance and Confidentiality of Communicable Disease Records and Information**

1. Maintenance and Confidentiality of Student-Related Records:
  - a. Health and medical records of an individually-identifiable student that relate to any communicable disease, except for a student's immunization records and any other records that state law expressly defines as "pupil physical health records" (see below), shall be maintained in a confidential manner and with greater restrictions on access and disclosure than the student's general progress and behavioral records. Specifically:
    - 1) Any records covered by the previous paragraph, except for a record concerning the results of an HIV test (see below), must be treated as patient health care records under sections 146.81 to 146.84 of the state statutes. Therefore, any disclosure of such records by the District must be on a basis that is either expressly mandated by an applicable federal law; expressly mandated by an applicable state law and not simultaneously prohibited by a separate federal law; or expressly permitted under both Chapter 146 of the statute statutes and the federal FERPA (Family Educational Rights and Privacy Act) confidentiality law. Examples of applicable disclosure exceptions include the following:
      - a) Patient health care records may be disclosed after obtaining the informed consent of the student (if an adult) or the informed consent of the parent or guardian of a minor student. Informed consent must be obtained in writing and must meet the requirements of section 146.81(2) of the state statutes.
      - b) Patient health care records maintained by the District may be disclosed to a District employee or authorized agent of the District if the employee or agent is a school official who has legitimate educational interests in the record and if either (a) the employee or agent has responsibility for preparation or storage of such patient health care records, or (b) access to the patient health care records is necessary to comply with a requirement in federal or state law.
      - c) Patient health care records of a student that the District obtains as a "non-covered entity" (i.e., when the District is not a "covered entity" as defined by under Chapter 146) may be redisclosed by the District without obtaining informed consent if the redisclosure without consent is authorized by FERPA and if either (a) the redisclosure is limited to the purpose for which the patient health care record was initially received, or (b) a court has ordered the redisclosure.

- d) To the extent the District maintains any patient health care records in the capacity of a “covered entity” (as defined under Chapter 146) and the records relate to the health of a patient and were prepared by or under the supervision of a health care provider (including but not limited to a nurse licensed under ch. 441), the District may disclose such records without informed consent if the circumstances meet FERPA’s health and safety emergency standards and if the purpose of the disclosure concerns a good faith effort to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.
  - 2) Any record that concerns the results of an HIV test, as defined in section 252.01(2m) of the state statutes, shall be treated as provided under section 252.15 of the state statutes. Disclosure of such a record may be permitted only if authorized by law, such as when the disclosure is on a basis that is permitted under both section 252.15 and the federal FERPA confidentiality law.
    - a) Subject to the District’s student records policies and applicable law, a student’s personally-identifiable immunization records and certain lead screening records shall be maintained and treated as progress records of the student. Any other records of basic student health information that state law expressly defines as “pupil physical health records” (e.g., emergency medical cards, records of medication and first aid administration, etc.), shall be maintained and treated as behavioral records of the student.
1. Maintenance and Confidentiality of Employee-Related Records:
- a. Except as otherwise permitted or required by law, the District will treat health and medical records of an employee that relate to any communicable disease as records that are subject to the confidentiality requirements of the Americans with Disabilities Act (ADA) as it applies to records of employee medical histories and examinations and disability-related inquiries. Such records shall be maintained in a file that is separate from the employee’s other non-medical personnel records. See 29 C.F.R. §1630.14.
    - 1) A record that indicates only that an employee either has or has not been vaccinated for a particular communicable disease is not considered a record of a medical examination or a response to a disability-related inquiry under the ADA.
  - b. Employee medical records that are subject to the confidentiality requirements of the ADA, may be disclosed with the written consent of the employee or a person expressly authorized by the employee, which shall meet the requirements of “informed consent” if the records are also patient health care records under Ch. 146 of the state statutes. Such records may be disclosed without obtaining such written consent to the extent the disclosure is authorized by the ADA, including to the following persons:
    - 1) Appropriate supervisors and managers may be informed regarding necessary restrictions on the work or duties of the employee and necessary accommodations. However, if the records are also patient health care records or records of an HIV test, then the disclosure must also be authorized under an exception applicable to such records (see below).

- 2) First aid and safety personnel may be informed, when appropriate, if the employee's medical condition might require emergency treatment. However, if the records are also patient health care records or records of an HIV test, then the disclosure must also be authorized under an exception applicable to such records (see below).
- c. If the employee medical records are patient health care records of the employee that the District has obtained as a “non-covered entity” (i.e., when the District is not a “covered entity” as defined by under Chapter 146), then the District may re-disclose the records under any the following conditions:
- 1) By obtaining the informed, written consent of the employee or a person authorized by the employee.
  - 2) Without obtaining informed consent if the re-disclosure is limited to the purpose for which the patient health care record was initially received. However, if the record is also subject to the confidentiality requirements of the ADA, then the re-disclosure must also be authorized under the ADA (see above).
  - 3) Without obtaining informed consent if a court has ordered the redisclosure.
  - 4) As expressly mandated under an applicable and superseding federal law.
- d. If the employee medical records are records of an HIV test, disclosure of such a record may be permitted only if authorized by law, such as when the disclosure is on a basis that is permitted under both section 252.15 of the state statutes and under the ADA (see above).