



## Consolidated Federal Law: Entire legislation for the Epidemics Act 1950, version of 03/22/2020

### long title

Epidemics Act 1950.

StF: [Federal Law Gazette No. 186/1950](#) (WV)

### modification

[Federal Law Gazette No. 185/1961](#) (NR: GP IX [RV 450 AB 462 p. 71](#), BR: [p. 178](#).)

[Federal Law Gazette No. 116/1967](#) (NR: GP XI [RV 253 AB 389 p. 48](#), BR: [p. 252](#).)

[Federal Law Gazette No. 127/1968](#) (NR: GP XI [RV 622 AB 809 p. 98](#), BR: [p. 263](#).)

[Federal Law Gazette No. 702/1974](#) (NR: GP XIII [RV 1205 AB 1312 p. 119](#), BR: [AB 1234 p. 335](#).)

[Federal Law Gazette I No. 191/1999](#) (BG) (1. BRBG) (NR: GP XX [RV 1811 AB p. 179](#), BR: [AB 6041 p. 657](#).)

[Federal Law Gazette I No. 98/2001](#) (NR: GP XXI [RV 621 AB 704 S. 75](#), BR: [6398 AB 6424 S. 679](#).)

[Federal Law Gazette I No. 65/2002](#) (NR: GP XXI [RV 772 AB 885 p. 83](#), BR: [6488 AB 6496 p. 682](#).)

[Federal Law Gazette I No. 114/2006](#) (NR: GP XXII [IA 822/A AB 1545 p. 155](#), BR: [AB 7603 p. 736](#).)

[CELEX No.: [32003L0099](#) ]

[Federal Law Gazette I No. 76/2008](#) (NR: GP XXIII [RV 503 AB 530 p. 59](#), BR: [AB 7942 p. 756](#).)

[Federal Law Gazette I No. 43/2012](#) (NR: GP XXIV [RV 1732 AB 1763 p. 153](#), BR: [AB 8726 p. 808](#).)

[Federal Law Gazette I No. 80/2013](#) (NR: GP XXIV [RV 2166 AB 2256 S. 200](#), BR: [8946 AB 8962 S. 820](#).)

[Federal Law Gazette I No. 63/2016](#) (NR: GP XXV [RV 1187 AB 1230 p. 138](#), BR: [AB 9639 p. 856](#).)

[Federal Law Gazette I No. 37/2018](#) (NR: GP XXVI [RV 108 AB 139 S. 23](#), BR: [9967 AB 9970 S. 880](#).)

[CELEX No.: [32017L2399](#) , [32017L1572](#) ]

[Federal Law Gazette I No. 16/2020](#) (NR: GP XXVII [IA 397/A AB 112 p. 19](#), BR: [AB 10288 p. 904](#).)

[Federal Law Gazette I No. 23/2020](#) (NR: GP XXVII [IA 402/A AB 115 p. 22](#), BR: [AB 10291 p. 905](#).)

[Federal Law Gazette I No. 43/2020](#) (NR: GP XXVII [IA 484/A AB 132 p. 27](#), [Objection of BR: 151](#) BR: [10296 AB 10316 p. 906](#).; NR: [AB 177 p. 30](#).)

[Federal Law Gazette I No. 62/2020](#) (NR: GP XXVII [IA 622/A AB 230 p. 38](#), BR: [AB 10359 p. 909](#).)

[Federal Law Gazette I No. 103/2020](#) (NR: GP XXVII [AB 337 p. 47](#), BR: [10368](#) )

### text

#### I. MAIN PIECE.

#### determination of the disease.

#### Notifiable diseases.

§ 1.(1) Subject to the notification obligation:

1. Suspected cases of, illness and death from cholera, yellow fever, viral hemorrhagic fever, infectious hepatitis (hepatitis A, B, C, D, E), dog tapeworm (*Echinococcus granulosus*) and fox

tapeworm (*Echinococcus multilocularis*), infections with the influenza virus A/H5N1 or any other bird flu virus, polio, bacterial and viral food poisoning, leprosy, leptospiral disease, measles, MERS-CoV (Middle East Respiratory Syndrome Coronavirus ."), anthrax, psittacosis, paratyphoid fever, plague, smallpox, rickettsiosis caused by *R. prowazekii*, glanders, transmissible dysentery (amoebic dysentery), SARS (severe acute respiratory syndrome), transmissible spongiform encephalopathies, tularemia, typhoid fever (abdominal typhoid fever), puerperal fever, rage disorder ( *Lyssa*) and bite injuries caused by enraged or suspected animals,

2. Incidences and deaths from Bang's disease, chikungunya fever, dengue fever, diphtheria, hanta virus infections, virus-related meningoencephalitis, invasive bacterial diseases (meningitis and sepsis), whooping cough, legionnaires' disease, malaria, rubella, scarlet fever, relapsing fever, Trachoma, trichinosis, West Nile fever, severe *Clostridium difficile* associated diseases and Zika virus infections.

(2) The Federal Minister of Health and Women may, if justified for epidemiological reasons or required by international obligations, subject further communicable diseases to the reporting obligation by ordinance or extend existing reporting obligations.

### **reimbursement of the complaint.**

**§ 2.**(1) Every illness, every death from a notifiable illness, in the cases of § 1 Para. 1 Z 1 also every suspicion of such an illness, is to be reported to the district administrative authority (health authority) in whose area the sick person or suspected illness is or the death has occurred, stating the name, age and place of residence and, if possible, specifying the illness within 24 hours.

(2) Within the same period, persons who, without being ill themselves, excrete pathogens that cause bacterial food poisoning, paratyphoid fever, transmissible dysentery or typhoid fever, are to be notified to the district administrative authority (health authority).

(Note: Para. 3 repealed by [Federal Law Gazette I No. 63/2016](#) )

### **Persons obliged to report.**

**§ 3.**(1) The following are obliged to file a complaint:

1. The doctor consulted, in hospitals, maternity and other humanitarian institutions the head of the institution or the head of a department who is obliged to do so by special regulations;
- 1a. any laboratory that diagnoses the causative agent of a reportable disease;
2. the appointed midwife;
3. the professional nurses concerned with the care of the sick;
4. the head of the household (head of an institution) or the person entrusted with the management of the household (the management of the institution) in his place;
5. the heads of public and private schools and kindergartens in relation to the pupils, teachers and school employees under their direction;
6. the householder or the person entrusted with custody of the home in his/her place;
7. Owners of hotels and taverns and their officially approved representatives with regard to the people they accommodate or work for them;
- 8th. the homeowner or the person entrusted with administering the house rules;
9. in the case of anthrax, psittacosis, glanders, puerpal fever and rage disease (*Lyssa*) and bite injuries caused by enraged or suspected animals, tularemia, Bang's disease, trichinosis, leptospiral diseases and infections with the influenza virus A/H5N1 or another bird flu virus, also veterinarians, if they become aware of the infection of a person or the suspicion of such an infection in the exercise of their profession;
- 10 the coroner.

(2) The obligation to notify is incumbent upon the persons designated under nos. 2 to 8 only if an obligated person previously named in the above list under nos. 1 to 7 is not available.

### Register of notifiable diseases

§ 4.(1) The federal minister responsible for the health system has an electronic register regarding the notifications pursuant to Section 1 (1) and (2) and Section 2 (2) Section 28c (*Note 1*) and the notifications pursuant to Sections 5 and 11 of the Tuberculosis Act, [Federal Law Gazette No. 127/1968](#) . The federal minister responsible for health care is responsible. With regard to the processing of personal data under this federal law, there is no right of objection in accordance with Art. 21 of Regulation (EU) 2016/679 on the protection of natural persons with regard to the processing of personal data, on the free movement of data and on the repeal of Directive 95/46/EC (General Data Protection Regulation ), OJ No. L 119 of 04.05.2016 p. 1.

(2) The register of notifications serves to fulfill the tasks of the district administrative authorities in conducting surveys on the occurrence of notifiable diseases (Section 5 of this Federal Act and Section 6 of the Tuberculosis Act) and to prevent the further spread and control of notifiable diseases (Sections 6 to 26a of this Federal Act and Section § 7 to 14 and 23 Tuberculosis Act) and the fulfillment of the tasks of the provincial governors within the scope of their coordination function according to § 43 paragraphs 6 and 7.

(3) The district administrative authorities are obliged to collect data from notifications pursuant to Section 1 (1) and (2) and Section 2 (2), Section 28c, data collected as part of surveys on the occurrence of notifiable diseases, and data which are related to measures taken, to be processed in the register. The district administration authorities are also obliged to register the data from notifications pursuant to Sections 5, 10 and 11 of the Tuberculosis Act, the data collected as part of surveys on the occurrence of tuberculosis, and the data relating to measures taken to process.

(4) The register processes the following categories of data:

1. Data for the identification of sick people, suspects of a disease, bitten, deceased or excreting (name, gender, date of birth, social security number and area-specific personal identifier (§ 9 E-GovG, [Federal Law Gazette I No. 10/2004](#) )),
2. if applicable, death dates (date, cause of death, autopsy status),
3. the clinical data relevant to the notifiable disease (history and course of the disease) and laboratory data,
4. Data on the environment of the sick person, suspected of being bitten, deceased or excreting a disease, insofar as they are related to the notifiable disease, and
5. Data on the precautionary measures taken.

(5) When processing data in accordance with paragraphs 2 to 4, the use of the name and the area-specific personal identifier GH is permitted.

(6) Any use of the data processed in the register may only take place in the implementation of this Federal Act, in the implementation of the Tuberculosis Act or in the implementation of the Zoonoses Act, [Federal Law Gazette I No. 128/2005](#) .

(7) The district administrative authority may, within the scope of its competence for the purpose of surveys on the occurrence and the prevention and control of a notifiable disease under this Federal Act and under the Tuberculosis Act, enter all data of a person in the register that is related to a specific suspected, diseased or death, process personal data. Within the scope of his coordination function pursuant to Section 43 (5) and (6), the governor may process all the data of a person in the register that is related to a specific suspected case, illness or death. If the Federal Minister responsible for veterinary affairs has appointed an expert to clarify cross-state zoonoses outbreaks in accordance with Section 3 (7) of the Zoonoses Act, may process all personal data of persons in the register that may be related to an outbreak of zoonoses, insofar as this is necessary to clarify an outbreak. The Federal Minister responsible for the health system may process the data of a person in the register on a personal basis in order to fulfill the obligations under Articles 15 and 16 of the General Data Protection Regulation.

(8) The Federal Minister responsible for the health system may process the data in the register in pseudonymised form for the purposes of epidemiological surveillance, quality assurance and to fulfill reporting obligations resulting from EU law. The federal minister responsible for health care can use third parties as processors. The district administrative authority and the state governor may process the data in the register in pseudonymised form for the purposes of epidemiological surveillance.

(9) The Federal Minister responsible for the health system, family and youth, must ensure that access to the register is only possible with proof of clear identity (§ 2 Z 2 E-GovG) and authenticity (§ 2 Z 5 E-GovG). is. He must ensure that suitable, state-of-the-art precautions are taken to prevent the data in the register from being destroyed, modified or accessed by unauthorized users or systems, and that all operations carried out, such as in particular entries, changes, queries and Transmissions are logged to the extent necessary.

(10) The confidentiality of data transmission is to be guaranteed by state-of-the-art encrypted transmission methods.

(11) The data in the register are to be deleted as soon as they are no longer required to fulfill the tasks of the district administrative authorities in connection with the survey of the occurrence and in connection with the prevention and control of a notifiable disease under this Federal Act and under the Tuberculosis Act.

(12) The district governor, the state governor and the federal minister responsible for the health system are obliged to assign and document the access authorization for the individual users individually. Authorized persons are to be excluded from further exercising their access authorization if they no longer need it to continue fulfilling the tasks assigned to them or if they do not process the data in accordance with their intended purpose.

(13) The district administrative authorities and the state governor must take organizational and technical precautions to ensure that only officials of the authority have access to rooms in which there is a possibility of accessing the register. If it is necessary for party traffic to take place in rooms with access to the register, it must be ensured in any case that it is not possible for outsiders to inspect the data in the register.

(14) If the communications equipment that enables access to the register is removed from the area of the authorities, it must be ensured that unauthorized inspection and use is excluded.

(15) Laboratories must comply with their obligation to report (Section 1 in conjunction with Section 3 Para. 1 No. 1a of this Federal Act and Section 5 Para. 2 of the Tuberculosis Act) electronically by entering the report in the register. The federal minister responsible for the health system has to specify the details of these reports by ordinance.

(16) The Austrian Agency for Health and Food Safety, as the national reference center and reference laboratory for tuberculosis, must comply with its reporting obligation pursuant to Section 1 in conjunction with Section 3 Para. 1 Z 1a (laboratory findings) electronically by entering the report in the register. Furthermore, the results of the resistance test and typing must be entered electronically into the register.

(17) The federal minister responsible for the health care system can issue an ordinance, subject to technical possibilities, that persons who are obliged to report under section 3 para. 1 no. 1 can also fulfill their reporting obligation under section 1 electronically by entering the report in the register. The data security measures provided for in paragraphs 12 to 14 are to be taken by those who are obliged to report.

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*Note 1: Art. 33 Z 1 of the amendment [BGBl. I No. 16/2020](#) reads: "In § 4 Para. 1, after the word sequence "and § 2 Para. 2," the word sequence "§ 28c" is inserted. ". Correct would be: "In § 4 paragraph 1 after the word sequence "and § 2 paragraph 2" the word sequence "§ 28c" is inserted.).*

### Statistics register

**§ 4a.**(1) The data (Article 4 (3) and 14 to 17) must also be transferred to a statistical register to be operated by the Federal Minister responsible for the health system immediately after the report

has been made. This is used for statistics and scientific research.

(2) Data already contained in the register (§ 4) at the time this federal law in the version of the 2nd Material Data Protection Adaptation Act, [Federal Law Gazette I No. 37/2018](#), came into force must be transferred to the statistics register at this point in time.

(3) The data are to be transferred to the statistics register after the data for personal identification have been replaced by a non-traceably encrypted unique personal identifier. Gender and year of birth are not subject to pseudonymisation.

(4) Pursuant to Article 5 Paragraph 1 lit.

(5) The Federal Minister responsible for the health system, the provincial governors and district administrative authorities and the Austrian Agency for Health and Food Safety are entitled to process the data in the register for the purposes specified in paragraph 1.

### **Surveys on the occurrence of a disease.**

**§ 5.**(1) The competent authorities shall immediately initiate the surveys and investigations required to determine the disease and the source of the infection through the doctors available to them for every report and every suspicion of the occurrence of a notifiable disease. Sick people, people who are suspected of being ill or suspected of being infected are obliged to provide the responsible authorities with the necessary information and to undergo the necessary medical examinations and the removal of test material. For the purpose of identifying germs, professional testing institutes should be used if possible.

(2) Under which conditions and by which bodies the opening of corpses and the examination of corpse parts can be carried out during these surveys is determined by ordinance.

(3) At the request of the district administrative authority, all persons who could contribute to the surveys, such as treating doctors, laboratories, employers, family members and staff of community facilities, are obliged to provide information.

## **II. MAIN PIECE.**

### **Measures to prevent and control notifiable diseases.**

#### **Initiation of precautionary measures in the event of the occurrence of notifiable diseases.**

**§ 6.**(1) For every case of a notifiable disease and for every suspected case of such a disease, in addition to the surveys that may be required under Section 5, the precautions necessary to prevent the further spread of the disease in question within the meaning of the following provisions are to be taken without delay for the duration of the risk of infection meeting.

(2) Ordinances of the district administration authorities are to be published in electronic form on the authority's website; they can also be published in another form without affecting the announcement, in particular by posting them on the official notice board of the authority or on the notice board of the municipalities in the affected area.

#### **Isolation of the sick.**

**§ 7.**(1) Those notifiable diseases are designated by ordinance for which isolation measures can be ordered for persons who are ill, suspected of being ill or suspected of being infected.

(1a) In order to prevent the further spread of a notifiable disease listed in an ordinance pursuant to para. 1, persons who are ill or suspected of being ill or suspected of being infected may be stopped or restricted in their dealings with the outside world if, based on the type of illness and the behavior of the person concerned, a serious and significant danger to the health of other people that cannot be eliminated by more lenient measures. The detained person can apply to the district court in whose district the place of detention is located to review the admissibility and lift the restriction of freedom in accordance with Section 2 of the Tuberculosis Act. Any detention is to be reported to the district court by the district administrative authority that ordered it.

(2) If appropriate segregation within the meaning of the arrangements made cannot be made in the patient's home or if segregation is omitted, the patient must be accommodated in a hospital or another suitable room if the transfer can take place without endangering the patient .

(3) For the purpose of isolation, where it appears necessary with regard to the local conditions, suitable rooms and permissible means of transport are to be made available in good time, or transportable barracks hospitals equipped with the necessary facilities and staff are to be set up.

(4) Apart from the cases of isolation of a sick person within the meaning of paragraph 2, the transfer from the apartment in which he is located can only take place with official approval and under close observation of the precautionary measures to be ordered by the authority.

(5) This permit is only to be granted if there is no risk of endangering public considerations and the patient is to be taken to an institution intended for the admission of such patients or the transfer appears absolutely necessary according to the situation.

### **Disinfection.**

**§ 8th.**(1) Objects and rooms that are assumed to be contaminated with germs of a notifiable disease (suspected of being contagious) are subject to official disinfection. If appropriate disinfection is not possible or is too expensive in relation to the value of the item, the item can be destroyed.

(2) Objects suspected of being infected may not be withdrawn from disinfection or destruction and may not be removed from the apartment before these measures are carried out.

(3) The person who is obliged to report the case in question according to Section 3 must report the successful implementation of the disinfection in the manner prescribed under Section 2.

(4) The disinfection is to be carried out under professional supervision as required.

(5) The more detailed regulations on the initiation and type of implementation of the disinfection and the destruction of objects are issued by ordinance.

### **Exclusion of individuals from educational establishments.**

**§ 9.**(1) Residents of towns or houses in which a notifiable disease has occurred can be excluded from attending schools, kindergartens and similar institutions.

(2) The management of the institution is to be informed of the exclusion that has taken place.

(3) Both the excluded persons themselves and, in the case of minors, their legal representatives, as well as the organs appointed to monitor visits to the institution, are responsible for observing this prohibition.

### **Restrictions on water use and other precautionary measures.**

**§ 10.**(1) In localities in which a notifiable disease has occurred or that are threatened by such a disease that has occurred elsewhere, as well as in the vicinity of such localities, the use of public bathing, Laundromats and public toilets are restricted or prohibited and other suitable precautionary measures are decreed.

(2) In the same way, if abdominal typhus, paratyphoid fever, dysentery, typhus, Asian cholera, Egyptian eye infection or anthrax occur, the use of springs, wells, aqueducts, streams, ponds and other bodies of water may be restricted or prohibited. ( [Federal Law Gazette No. 449/1925](#) , Article III, Paragraph 2.)

(3) However, the bans specified in the previous paragraph do not extend to the use of water to generate motor power, for traffic and industrial purposes, but to the use of water for the production and sale of food and beverages.

### **Restriction of food traffic.**

**§ 11.**The delivery of food from sales outlets, houses or, if necessary, from individual local areas in which scarlet fever, diphtheria, typhoid fever, paratyphoid fever, dysentery, typhus, smallpox,



Asiatic cholera, plague or Egyptian eye infection has occurred may be prohibited or made dependent on certain precautions.

( [Federal Law Gazette No. 449/1925](#) , Article III, Paragraph 2.)

#### **Sealing off of apartments, ban on funeral ceremonies.**

§ 12.(1) If scarlet fever, diphtheria, typhus, smallpox, Asian cholera or plague occur, uninvited persons may not enter the rooms suspected of being infected before disinfection is carried out, and funeral meals and other funeral ceremonies may not be held in the same building.

(2) It may be determined by ordinance that the same ban also applies to the occurrence of another notifiable disease.

#### **Measures related to corpses.**

§ 13.(1) The corpses of persons suffering from typhus, smallpox, Asian cholera or plague are to be transported to a mortuary with the greatest possible speed.

(2) If scarlet fever, diphtheria, anthrax or glanders occur, the corpses of persons suffering from one of these diseases may also be ordered to be transferred to a mortuary.

(3) If the transfer to a morgue cannot take place, the corpse shall be kept separate until burial in such a way that unauthorized persons do not have access to the corpse.

(4) If necessary, the transfer or isolation of the corpse shall be carried out compulsorily.

(5) More detailed regulations on the coffin, transfer and burial of such corpses and on the establishment of morgues are issued by ordinance.

#### **extermination of animals.**

§ 14.To prevent the further spread of communicable diseases, measures can be taken to destroy animal pests.

( [BGBl. No. 151/1947](#) , Article II Z 5 lit. e.)

#### **Measures against the confluence of larger crowds.**

§ 15.The district administrative authority must ban events that involve large crowds of people flocking together if and for as long as this is absolutely necessary in view of the type and extent of the occurrence of a notifiable disease to prevent it from spreading.

#### **Special Reporting Rules.**

§ 16.For places and areas where there is a risk of a notifiable disease developing or being imported from other areas, special orders can be issued - irrespective of the applicable reporting regulations - about the reporting of foreigners and locals and about the keeping of the reports on record.

#### **Surveillance of Certain Individuals.**

§ 17.(1) Persons who are to be regarded as carriers of germs of a notifiable disease may be subjected to special medical police observation or surveillance. According to detailed instructions from the district administrative authority (health authority), you may not work in the production or treatment of food in a way that entails the risk of germs being transmitted to other people or to food. For these persons, a special obligation to report, periodic medical examinations and, if necessary, disinfection and isolation in their homes can be ordered; if isolation in the apartment cannot be carried out in a practical manner, isolation and catering can be ordered in separate rooms.

(2) If the suspected infection relates to the transmission of typhus, smallpox, Asian cholera or the plague, the medical police must observe and monitor the person suspected of being infected in

the sense of the previous paragraph.

(3) Observation of special precautions shall be ordered for persons who professionally deal with the treatment of the sick, nursing or funeral arrangements, and for midwives. Traffic and occupational restrictions as well as protective measures, in particular vaccinations, can be ordered for such persons.

(4) If this is absolutely necessary with regard to the type and extent of the occurrence of a notifiable disease to prevent it from spreading, the district administrative authority can order the implementation of protective vaccinations or the administration of prophylactics for certain endangered persons in individual cases.

#### **closure of educational institutions.**

**§ 18.** The complete or partial closure of schools, kindergartens and similar institutions can be declared in the event of the occurrence of a notifiable illness. The responsible school authority must be informed of this order, which must carry out the closure immediately.

#### **Ban on peddling.**

**§ 19.**(1) The practice of peddling and gainful employment while wandering around can be prohibited in the area of one or more towns or communities if a notifiable disease occurs.

(2) This ban and its lifting must also be announced in the neighboring communities if necessary.

#### **Note for the following determination**

see Art. 1, [Federal Law Gazette II No. 74/2020](#)

#### **Restrictions on operations or closure of commercial enterprises.**

**§ 20.**(1) If scarlet fever, diphtheria, typhoid fever, paratyphoid fever, bacterial food poisoning, typhus, smallpox, Asian cholera, plague or anthrax occur, the closure of business premises in which certain trades are carried out can pose a particular risk to the spread of this disease entails, be ordered for specific areas to be designated if and to the extent that, given the conditions existing in the company, maintaining the same would pose an urgent and serious risk to the employees themselves and to the general public through the further spread of the disease. ( [Federal Law Gazette No. 449/1925](#) , Article III Paragraph 2, and [Federal Law Gazette No. 151/1947](#) , Article II Z 5 lit. h.)

(2) If one of the illnesses listed in the first paragraph occurs, the operation of individual commercially operated companies with a fixed place of business can be restricted or the closure of the place of business can be ordered under the other conditions specified there, as well as individual persons who come into contact with sick people to enter the establishments are prohibited.

(3) However, the closure of a business premises is only to be ordered if extraordinary dangers make it appear necessary.

(4) The extent to which the precautions specified in paragraphs 1 to 3 can also be taken if another notifiable disease occurs is determined by ordinance.

#### **Designation of houses and apartments.**

**§ 21.**(1) In the event of abdominal typhus, paratyphoid fever, typhus, smallpox, Asian cholera or plague, houses, in the case of scarlet fever, diphtheria, epidemic stiff necks, apartments in which sick people are located can be identified by appropriate designations. These designations must not be removed before the disinfection has been carried out. ( [Federal Law Gazette No. 449/1925](#) , Article III, Paragraph 1.)

(2) The form of the designation is determined by regulation.

#### **clearance of apartments.**



**§ 22.**(1) The district administrative authority shall order the evacuation of apartments and buildings if this measure is absolutely necessary depending on the type of occurrence of a notifiable disease to prevent it from spreading.

(2) The residents concerned are to be provided with appropriate board and lodging at their request, and free of charge in the event of their poverty.

#### **Traffic restriction for certain items.**

**§ 23.**When scarlet fever, diphtheria, typhoid fever, paratyphoid fever, dysentery, typhus, smallpox, Asian cholera, plague, Egyptian eye infection, anthrax or glanders occur, trafficking in objects that may be carriers of germs and from an area affected by the disease originate, are prohibited or made dependent on certain precautions.

( [Federal Law Gazette No. 449/1925](#) , Article III, Paragraph 2.)

#### **Traffic restrictions for residents of certain localities.**

**§ 24.**If this is absolutely necessary with regard to the type and extent of the occurrence of a notifiable disease to prevent it from spreading, the district administrative authority must impose traffic restrictions for the inhabitants of epidemic areas. Likewise, restrictions on traffic with the residents of such areas can be ordered from the outside.

#### **Traffic restrictions to foreign countries.**

**§ 25.**By ordinance, on the basis of existing laws and international treaties, it is determined which measures to prevent the introduction of a disease from abroad, the admission of seagoing vessels and other vehicles used for passenger or freight traffic, the import and transit of goods and commodities, finally the entry and the carriage of persons.

#### **Regulations relating to transport companies in Germany.**

**§ 26.**(1) For the operation of public transport facilities (railways, inland waterway companies, rafts, etc.) and for traffic on them, an ordinance shall determine how and by which bodies the precautions specified in this Act for the prevention and control of notifiable diseases are to be applied bring are.

(2) In the same way, the necessary orders for the application of the provisions of this Act to ships and port buildings and other objects located in the area of the maritime authorities are issued by ordinance.

#### **Special provisions regarding zoonoses**

**Section 26a.**(1) Laboratories that diagnose zoonotic pathogens within the meaning of Annex I of the Zoonoses Act, [Federal Law Gazette I No. 128/2005](#) , have - insofar as diseases of these pathogens are subject to the reporting obligation under this Federal Act - have the corresponding isolates to the competent national reference laboratory for further processing submit investigation.

(2) The national reference laboratories are obliged to inform the heads of the state commissions for zoonoses control, the district administrative authorities concerned, the office of the Federal Commission for the Monitoring of Zoonoses and the Immediately report to the Austrian Agency for Health and Food Safety.

(3) The national reference laboratories are obliged to send the heads of the state commissions for combating zoonoses a list of all findings on diseases of zoonotic pathogens within the meaning of paragraph 1 for the respective federal state on a monthly basis.

(4) The Federal Minister for Health and Women's Affairs shall determine the content and scope of the reports pursuant to paras. 2 and 3 by ordinance. A transmission of personal data can be specified to the extent that is necessary to clarify food-borne outbreaks of diseases caused by zoonotic pathogens.

### **Special regulations regarding unpreventable diseases**

**Section 26b.**Laboratories that diagnose meningococci, pneumococci or Haemophilus influenzae must - insofar as diseases of these pathogens are subject to reporting requirements - send the corresponding isolates to the responsible national reference laboratory for further examination.

#### **epidemic doctors.**

**§ 27.**(1) If, when a notifiable disease occurs, the doctors available in the affected areas, primarily the community and district doctors, are not sufficient to combat the disease effectively, epidemic doctors can be appointed for the duration of the need.

(2) When epidemic doctors are appointed, their remuneration is regulated by contract with the proviso that in the event of their illness they continue to draw their full salary even if it does not justify their occupational disability.

#### **Measures related to pathogens.**

**§ 28.**Special orders can be issued by ordinance for the execution of examinations and work with pathogens as well as for their storage and handling.

### **Participation of organs of the public security service**

**Section 28a.**(1) The organs of the public security service have the authorities and organs responsible under this Federal Act on their requests in the exercise of their tasks described in Sections 5, 6, 7, 15, 17, 22 and 24 or in enforcing the planned measures if necessary, using coercive means.

(2) If, according to the expert assessment of the authorities responsible under this Federal Act, within the framework of the support for the organs of the public security service provided for in para. 1, there is a risk associated with the type of communicable disease and its transmission possibilities, which can only be countered by special protective measures the authorities responsible under this federal law are obliged to take adequate protective measures.

### **Measures in the context of a pandemic**

**Section 28b.**(1) The national IHR contact point within the meaning of the International Health Regulations, [Federal Law Gazette III No. 98/2008](#) , is the Federal Ministry responsible for the health system (Art. 4 Para. 1 and 2 IHR).

(2) The decision as to which information the national IHR focal point forwards to the World Health Organization (hereinafter: WHO) and to which authorities information transmitted by the WHO to the national IHR focal point is forwarded shall be made by the public health officer federal minister.

(3) The district administration authorities and provincial governors shall immediately provide the federal ministry responsible for the health system with all the information they have that is required for notifications to the WHO within the meaning of Articles 6 to 12 and 19 letter c IHR.

(4) Insofar as this is necessary to fulfill the obligations under the IHR, district administrative authorities and state governors are entitled to transmit personal information within the scope of para. 3 and the Federal Minister responsible for the health system is entitled to transmit personal information to district administrative authorities, state governors who To transmit to WHO and competent authorities abroad.

### **Scientific, in particular veterinary medical facilities according to § 2 Para. 2 Z 1 Medical Act 1998**

**Section 28c.**(1) The facilities are obliged to report this to the Federal Ministry for Social Affairs, Health, Care and Consumer Protection before starting their work for people. These reports are to be brought to the attention of the district administration authorities.

(2) The institutions are subject to the reporting obligation pursuant to Sections 2 and 3 of this federal law.

(3) The report must be made in accordance with the ordinance of the Federal Minister of Health regarding electronic laboratory reports in the register of notifiable diseases, [Federal Law Gazette II No. 184/2013](#) . As long as this is not technically possible, the report can also be made in writing, verbally or by telephone, whereby it must be repeated in writing after a verbal or telephone report.

### **III. MAIN PIECE.**

#### **Compensation and defrayal of costs.**

##### **claim for compensation.**

**§ 29.**(1) Appropriate compensation shall be granted for objects which have been subjected to official disinfection in accordance with the provisions of this Act and have been damaged in the process in such a way that they can no longer be used for their intended purpose, as well as for destroyed objects.

(2) Compensation shall be paid to the person in whose possession the item was.

(3) No compensation will be paid for property owned by a public entity (federal, state, county, local church, school board, etc.) or public fund.

##### **loss of the right to compensation.**

**§ 30.**(1) The right to compensation is lost if the owner or possessor of the object, in relation to the disease for the prevention or control of which the disinfection or destruction was ordered, takes an action that conflicts with the provisions of this Act or the orders issued on the basis of the same or guilty of omission.

(2) Likewise, the right to compensation shall be lost if the owner of the damaged or destroyed objects took possession of them or some of them even though he knew or had to assume that they already contained the disease substance or by order of the authorities were to be disinfected.

#### **Determining the amount of damage.**

**§ 31.**(1) If the damage caused by the disinfection or destruction cannot be determined in a sufficient manner on the basis of the declaration of the owner, possessor or custodian or other suitable indications, the same is before the return or destruction by sworn experts and, where this is not feasible is to be estimated by impartial memorial witnesses who are able to assess the value of the damaged items.

(2) The assessment does not apply if the owner or possessor of the item declares that he will not assert a claim for compensation.

#### **Compensation for loss of earnings.**

**§ 32.**(1) Natural and legal persons as well as partnerships under commercial law are to be compensated for the financial disadvantages caused by the hindrance to their acquisition, if and to the extent

1. they have been separated in accordance with §§ 7 or 17, or
2. they have been prohibited from supplying food in accordance with Article 11, or
3. they have been prohibited from pursuing gainful employment pursuant to Section 17, or
4. they are employed in a limited or closed company pursuant to Section 20, or
5. they operate a company whose operations have been restricted or blocked in accordance with Section 20, or
6. they live in apartments or buildings whose evacuation has been ordered in accordance with

Section 22, or

7. they live or work in a locality on which traffic restrictions have been imposed in accordance with Section 24,

and there was a loss of earnings as a result.

(2) The remuneration is to be paid for each day covered by the official order mentioned in paragraph 1.

(3) The remuneration for persons who are in an employment relationship is to be calculated according to the regular remuneration within the meaning of the Continued Remuneration Act, [Federal Law Gazette No. 399/1974](#) . Employers must pay them the due amount of remuneration on the usual dates for payment of remuneration in the company. The entitlement to remuneration from the federal government passes to the employer at the time of payment. The employer's contribution to the statutory social insurance to be paid by the employer for the period of the disability and the surcharge in accordance with Section 21 of the Construction Workers' Leave Act 1972, Federal Law Gazette No. 414, is to be reimbursed by the federal government.

(4) For self-employed persons and companies, the compensation is to be calculated according to the comparable updated economic income.

(5) Amounts that are due to the person entitled to remuneration due to such an occupational disability under other regulations or agreements as well as from other employment taken up during the period of the occupational disability are to be offset against the due amount of remuneration.

#### **Deadline for asserting a claim for compensation or compensation for loss of earnings.**

**§ 33.** The claim for compensation according to § 29 is within six weeks after the disinfection or return of the object or after notification of the completed destruction, the claim for compensation for loss of earnings according to § 32 within six weeks from the day the official measures are lifted at the district administrative authority in whose area these measures were taken, otherwise the claim expires.

#### **Reimbursement of treatment costs for persons bitten by enraged dogs**

**Section 33a.**(1) The treatment costs for persons bitten by a dog that is enraged or suspected of being enraged shall be borne by the solvent dog owner, unless a health insurance provider or a health welfare institution or an accident insurance provider is responsible for paying the costs.

(2) If the dog owner is unable to pay or cannot be identified, one third of the treatment costs (paragraph 1) shall be borne by the municipality in whose area the bite injury occurred and two thirds by the federal government.

(3) Compensation claims under paragraphs 1 and 2 must be asserted within six months of the end of the treatment at the district administrative authority, otherwise they will be excluded.

#### **Peace and care pleasures for doctors and their bereaved.**

**§ 34.**(1) If a doctor is working in Germany to fight a notifiable illness, becomes unable to work or dies, he and, in the event of his death, his surviving dependents are entitled to rest and care benefits. The general pension norms must be observed when awarding these rest and pension benefits as well as the death contribution. ( [BGBI. No. 161/1925](#) .)

(2) If the doctor or his surviving dependents are entitled to rest and care benefits according to other regulations from his employment relationship, then in the cases referred to in paragraph 1 they shall be entitled to what is stipulated in the Ordinance [Federal Law Gazette No. 161/1925](#) or in a the extent prescribed by the applicable regulation.

(3) If the rest and care benefits due to the doctor or his surviving dependents according to other regulations from his employment relationship reach or exceed the extent prescribed in paragraph 1, the preceding provisions of this paragraph shall not apply.

### **Rest and care enjoyment for carers and their bereaved.**

**Article 35.**(1) If a caregiver becomes unable to work or dies as a result of their permanent or temporary use in the public medical service to combat a notifiable illness, they and, in the event of their death, their surviving dependents are entitled to rest and care benefits. When granting these rest and pension benefits as well as the death contribution, the general pension norms are to be observed. ( [BGBl. No. 161/1925](#) .)

(2) If the caregiver or their surviving dependents are entitled to rest and care benefits according to other regulations from their employment relationship, they shall, in the cases referred to in paragraph 1, be referred to in the Ordinance [Federal Law Gazette No. 161/1925](#) or in a place in their place the extent prescribed by the applicable regulation.

(3) If the caregiver or their surviving dependents, according to other regulations from their employment relationship, reach or exceed the extent prescribed in paragraph 1, the preceding provisions of this paragraph shall not apply.

(4) If a caregiver falls ill under the conditions specified in paragraph 1 without the effects provided for there occurring, they are entitled to continued payment of their salary.

(5) This paragraph also applies to persons employed in patient transport and disinfection in accordance with Section 8.

### **Costs from the Federal Treasury.**

**§ 36.**(1) The following are to be disputed from the federal treasury:

(Note: *lit. a* repealed by [Federal Law Gazette No. 151/1947](#) , Article II Z 5 *lit. j.*)

b) the costs of the examinations carried out in state examination institutes pursuant to Section 5;

c) the costs of destroying animals through which germs can be spread (section 14);

d) the costs of monitoring and isolating persons suspected of being infected (section 17);

e) the costs of providing accommodation (section 22);

f) the costs of precautionary measures to restrict traffic with residents of contaminated towns and settlements (section 24);

G) the fees of the epidemic doctors (§ 27);

H) compensation for objects damaged or destroyed during disinfection (sections 29 to 31);

i) the compensation for the loss of earnings (§ 32) and the treatment costs according to § 33a paragraph 2;

k) the enjoyment of rest and care for doctors and their surviving dependents (§ 34);

l) the enjoyment of rest and care for carers and their surviving dependents (§ 35);

m) the costs of the official acts to be maintained by the state authorities and organs in connection with the implementation of this law.

(2) The district administrative authority shall decide on claims raised pursuant to paragraph 1.

(3) The federal government bears the costs of the court proceedings.

### **reimbursement of costs by the parties.**

**§ 37.**Determined to be no longer valid. (Transitional [amendment Federal Law Gazette No. 269/1925](#) .)

## **IV. MAIN PIECE.**

### **Penal Provisions.**

#### **Violation of a notification or reporting obligation.**

**§ 39.**(1) Anyone who violates the instructions contained in this Federal Act or issued on the basis of this Act regarding the filing of notifications and reports is guilty of an administrative offense and shall be punished with a fine of up to EUR 2,180, or with imprisonment for up to six weeks in the event of non-compliance.

(2) Criminal prosecution does not take place if the report was not made by those initially obliged but was made in good time.

### **Other Violations.**

**Article 40.**Who by acts or omissions

- a) the requirements and prohibitions contained in the provisions of §§ 5, 8, 12, 13, 21 and 44 paragraph 2 or
- b) the official orders or prohibitions issued on the basis of the provisions listed in §§ 7, 9, 10, 11, 12, 13, 14, 15, 17, 19, 20, 21, 22, 23 and 24 or
- c) violates the requirements or prohibitions contained in the ordinances issued on the basis of this federal law, or
- d) in violation of his duty of care, does not ensure that the person placed under his care and custody undergoes a medical examination ordered on the basis of Section 5 (1) and the removal of test material,

shall be guilty of an administrative offense unless the act is punishable by a court of law and shall be punished with a fine of up to 1,450 euros, or with imprisonment of up to four weeks in the event of non-compliance.

### **Confiscation and Forfeiture of Items.**

**Article 41.**(1) Objects whose safekeeping, treatment or use violates or circumvents a provision of this Act or an order issued on the basis thereof may be confiscated by the appointed organs of the sanitary authorities.

(2) Objects with which a traffic ban issued under Section 25 was violated or circumvented must be confiscated and declared forfeited by the district administrative authority in whose district they were entered. ( [StGBI. No. 94/1945](#) in the version of [BGBl. No. 142/1946](#) , Section II C § 15 Para. 2.)

(3) The confiscation and forfeiture of objects within the meaning of paragraph 2 are independent of the initiation of criminal prosecution of a specific person and the conviction of the same.

(4) If the destruction of an item that has expired does not have to occur, it is to be sold by public auction after it has been disinfected accordingly.

### **allocation of fines.**

**Article 42.**The fines and the proceeds from the items declared forfeit accrue to those municipalities in whose territory the criminal act was committed or the item declared forfeited was entered, and are to be used for public health care purposes.

## **V. MAIN PIECE.**

### **General Provisions.**

#### **Regulatory Competencies.**

**Article 43.**(1) The provisions of the law of April 30, 1870, RGBI. No. 68, concerning the organization of the public health service, remains unaffected by the provisions of the present law.

(Note: Para. 2 repealed by [Federal Law Gazette I No. 63/2016](#) )



(3) In the event of scarlet fever, diphtheria, abdominal typhus, paratyphoid fever, typhus, smallpox, Asiatic cholera, plague, Egyptian eye infection, rage disease, bite injuries from animals that are ill or suspected of being enraged, as well as in other cases of urgent danger, the surveys referred to in Article 5, paragraph 1 are to be carried out and to take the precautions referred to in §§ 7 to 14 immediately on the spot by the responsible doctors who are part of the public medical service.

(4) The initiation, implementation and safeguarding of all surveys and precautions prescribed in this Act for the prevention and control of notifiable diseases or the monitoring and promotion of the precautions taken primarily by the responsible medical authorities are the task of the district administrative authority.

(5) Within the scope of his local area of responsibility, the provincial governor is responsible for coordinating and monitoring the measures taken by the district administrative authorities in accordance with paragraph 4. If there is a suspicion or knowledge of a cross-state outbreak of a disease in accordance with section 1 paragraphs 1 and 2, the provincial governors are to work together with the federal states concerned and to coordinate their activities.

(6) The Federal Ministry of Health, Family and Youth is to be informed immediately by the state governor in the event of outbreaks of disease.

### **Special powers of the health authorities and their organs.**

**Article 44.**(1) The doctors appointed to examine a case of illness within the meaning of Section 43 (3) or on the basis of an official order shall, after notifying the head of household or the person entrusted with the management of the care of a sick person, be allowed to access the sick person or the corpse and to carry out the for the purpose of diagnosing the illness. If possible, this should be done in agreement with the doctor treating you.

(2) The officially delegated bodies responsible for carrying out the disinfection or other precautionary measures within the meaning of this Act may have access to properties, houses and other facilities, in particular to rooms and objects suspected of being infected, and to take the necessary measures and those for disinfection or destruction necessary disposals of objects and rooms are not denied.

(3) If there is a suspicion that a notifiable disease is being kept secret or that objects suspected of being infected are being hidden, the district administrative authority may, in accordance with the provisions of §§ 3 and 5 of the law of October 27, 1862, RGBI. No. 88, a house search is to be carried out. ([StGBI. No. 94/1945](#) in the version of [BGBI. No. 142/1946](#) , Section II C § 15 Para. 2.)

### **Arrangements in the field of military administration.**

**Article 45.**The military authorities are responsible for carrying out the precautions to be taken in accordance with this law in the area of military administration. For the intended purposes, the military authorities and the medical authorities must be in agreement.

### **postage treatment.**

**Article 47.**(1) The persons who are obliged under this Act to submit notifications and notifications must use envelopes or cards for unregistered mail and without proof of delivery of such notifications and notifications, which are marked "Collect postage from the recipient" and bear the official seal of the recipient authority are to be provided. When the notification is handed over, the latter must pay the simple postage for sending the letter.

(2) If the receiving authority does not want to pay the fees due in each individual case, these fees can be deferred on a monthly basis.

( [BGBI. No. 151/1947](#) , Article II Z 5 lit. i.)

### **repeal of older regulations.**

**Article 48.**(1) All provisions on subjects that are regulated in this Act or are regulated by ordinance on the basis of the same shall cease to have effect upon the commencement of this Act or the relevant ordinance.

(2) The Court Chancellery Decree of January 11, 1816, PGS. Vol. 44 No. 3, concerning the defrayal of healing costs for poor people injured by angry dogs, was repealed on September 1, 1925, when Article 35 of the Administrative Relief Act, [Federal Law Gazette No. 277/1925](#) , came into effect.

(3) The patent of May 21, 1805, JGS. No. 731, became ineffective with the entry into force of this law in its original version (the words "§§ 393 up to and including 397 of the criminal law of May 27, 1852, RGBL. No. 117 and" are omitted with regard to the Austrian criminal law 1945, Col. No. 2).

(4) The ordinances of December 17, 1917, RGBL. No. 490, relating to combating malaria (intermittent fever), dated June 16, 1923, Federal Law Gazette No. 329, relating to the obligation to report varicella (chickenpox) and from January 11, 1927, Federal Law Gazette No. 38, relating to the obligation to report Poliomyelitis anterior acuta and encephalitis lethargica epidemica, were repealed when the federal law of June 18, 1947, Federal Law Gazette No. 151, came into effect. ( [Federal Law Gazette No. 151/1947](#) , Article IV Paragraph 4.)

### **effectiveness of the law.**

**Article 50.**(1) This law is in the version of the law of February 17, 1920, StGBL. No. 83 (Epidemic Law Amendment), and the Federal Law of December 3, 1925, Federal Law Gazette No. 449 (II. Epidemic Law Amendment), as well as the provisions of the Federal Law of June 18, 1947, Federal Law Gazette No. 151, Article II Z 5 and Article III and IV, paragraphs 3 and 4 - after the repeal of the relevant Reich legal regulations by the Federal Law of June 18, 1947, Federal Law Gazette No. 151, Article IZ 6 - came into force again on August 22, 1947.

(2) The changes in Section 36 (2) and Section 43 (4) and Section 43 (5) in the version of the Administrative Reform Act 2001, [Federal Law Gazette I No. 65/2002](#) , come into effect on July 1, 2002, but not before fourth first of the month following the promulgation of the Administrative Reform Act 2001.

(3) Proceedings pending at the effective date specified in para. 2 are to be carried out in accordance with the legal situation in force prior to this date.

(4) Section 43 in the version of the federal law , Federal [Law Gazette I No. 80/2013](#) , shall enter into force on January 1, 2014.

(5) §§ 1 para. 1 nos. 1 and 2, 4 para. 7, 7 para. 1 and 1a, 26b including the heading, 36 para. 3, 43 para. 4, and 51 as well as the omission of § 2 para. 3 and 43 para. 2 in the version of the Federal [Law Gazette I No. 63/2016](#) come into force on the day following the announcement.

(6) Article 4 paragraphs 1 to 5, 7 to 9, 11, 12, 15 and 17, Article 4a including the heading and Article 5 paragraph 3 in the version of the 2nd Material Data Protection Adaptation Act, [Federal Law Gazette I No. 37/2018](#) , come into force on May 25, 2018.

**Section 50a.**Insofar as this federal law refers to other federal laws, these are to be applied in their currently valid version.

**Section 50b.**(1) With the entry into force of this federal law in the version of Federal [Law Gazette I No. 43/2012](#) , the Ordinance of the Federal Minister of Health regarding notifiable communicable diseases 2009, Federal Law Gazette II No. 359, last amended by the Ordinance [Federal Law Gazette II No 359/2011](#) , repealed.

(2) With the entry into force of this Federal Act in the version of Federal [Law Gazette I No. 63/2016](#) , the Ordinance of the Federal Minister of Health on Notifiable Communicable Diseases 2015, [Federal Law Gazette II No. 224/2015](#) , shall expire.

### **completion.**

**Article 51.**With the execution of this federal law

1. with regard to Section 7 Paragraph 1a - insofar as it relates to the court proceedings - and Section 36 Paragraph 3 of the Federal Minister of Justice,
  2. with regard to § 28a the Federal Minister of Health in agreement with the Federal Minister of the Interior and
  3. otherwise the Federal Minister of Health
- entrusted.