County of Los Angeles • Department of Health Services • Public Health

REPORTABLE DISEASES AND CONDITIONS

Title 17, California Code of Regulations (CCR), § 2500

It shall be the duty of every health care provider, knowing of or in attendance on a case or suspected case of any diseases or conditions listed below, to report to the local health officer for the jurisdiction where the patient resides. Where no health care provider is in attendance, any individual having knowledge of a person who is suspected to be suffering from one of the diseases or conditions listed below may make such a report. "Health care provider" encompasses physicians, surgeons, veterinarians, podiatrists, nurse practitioners, physician assistants, registered nurses, nurse midwives, school nurses, infection control practitioners, medical examiners, coroners, dentists and chiropractors.

Urgency Reporting Requirements:

- \mathbf{r} = Report immediately by telephone.
- \boxtimes = Report by mailing, telephoning or electronically transmitting a report within 1 working day of identification of the case or suspected case.
- $\mathcal{C} = \text{Report by telephone within } \frac{1 \text{ hour}}{1 \text{ hour}}$ followed by a written report submitted by facsimile or electronic mail within $\frac{1}{1}$ working day.

If no symbol, report within 7 calendar days from the time of identification by mail, telephone or electronic report.

REPORTABLE DISEASES

Acquired Immune Deficiency Syndrome (AIDS)*

- Amebiasis
- Anthrax
- Babesiosis
- Botulism (Infant, Foodborne, Wound)
- → Brucellosis
- Campylobacteriosis
 - Chancroid*
- Chlamydial Infections*
- ☐ Cholera
- Ciguatera Fish Poisoning
- Coccidioidomycosis
- Colorado Tick Fever
- Conjunctivitis, Acute Infectious of the Newborn, Specify Etiology
- Cryptosporidiosis
- Cysticercosis
- → Dengue
- Diarrhea of the Newborn, Outbreaks
- □ Diphtheria
- Domoic Acid Poisoning (Amnesic Shellfish Poisoning)
 - Echinococcosis (Hydatid Disease)
 - **Ehrlichiosis**
- Encephalitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic
- Escherichia coli O157:H7 Infection
- - □ (2 or more cases from separate households with same suspected source)
 - Giardiasis
 - Gonococcal Infections*
- Hantavirus Infections

- → Hemolytic Uremic Syndrome Hepatitis, Viral
 - - Hepatitis B (Specify Acute Case or Chronic) Hepatitis C (Specify Acute Case or Chronic)
 - Hepatitis D (Delta) Hepatitis, Other, Acute
 - Human Immunodeficiency Virus (HIV)*
 - Kawasaki Syndrome (Mucocutaneous Lymph Node Syndrome)
 - Legionellosis
 - Leprosy (Hansen Disease)
- Leptospirosis
- Listeriosis Lyme Disease
- Lymphocytic Choriomeningitis
- Malaria
- Measles (Rubeola) \bowtie
- Meningitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic
- Meningococcal Infections
 - Mumps
- Non-Gonococcal Urethritis (report laboratoryconfirmed chlamydial infections as chlamydia)*
- → Paralytic Shellfish Poisoning
- Pelvic Inflammatory Disease (PID)*
- ➡ Plague, Human or Animal
- Poliomyelitis, Paralytic
- Psittacosis
- O Fever
- Rabies, Human or Animal 7
- Relapsing Fever Reve Syndrome
 - Rheumatic Fever, Acute

- Rocky Mountain Spotted Fever Rubella (German Measles)
- Rubella Syndrome, Congenital Salmonellosis (other than Typhoid Fever)
- Scabies (Atypical or Crusted) ★
- Scombroid Fish Poisoning
- Shigellosis
- Smallpox
- Streptococcal Infections:
- Outbreaks of any Type and Individual Cases in Food Handlers and Dairy Workers Only
- Invasive Group A Streptococcal Infections including Streptococcal Toxic Shock Syndrome and Necrotizing Fasciitis ★ (Do not report individual cases of pharyngitis or scarlet fever.)

Invasive Streptococcus pneumoniae ★

- Swimmer's Itch (Schistosomal Dermatitis)
- Syphilis* Tetanus
 - Toxic Shock Syndrome
 - Toxoplasmosis
- □ Trichinosis Tuberculosis*
- Tularemia
- Typhoid Fever, Cases and Carriers
- Typhus Fever
- Varicella: fatal cases only Varicella: hospitalized cases
- Vibrio Infections
- Viral Hemorrhagic Fevers (e.g., Crimean-Congo, Ebola, Lassa, and Marburg viruses)
- Water-associated Disease
- Yellow Fever
- Yersiniosis
- ☎ OCCURRENCE OF ANY UNUSUAL DISEASE
- ☎ OUTBREAKS OF ANY DISEASE

Notification Required of Laboratories (CCR § 2505)

- Botulism ■
- Cryptosporidiosis
- □ Diphtheria
 ◆
- © Escherichia coli O157:H7 or Shiga toxinproducing E. coli O157:NM +
- Gonorrhea*
- or positive viral antigen test
- Hepatitis B, acute infection, by IgM anti-HBc antibody test
- gender) Human Immunodeficiency Virus (HIV)*
- Listeriosis

 ◆
- 🗷 Malaria 🛨
- Measles (Rubeola), acute infection, by IgM antibody test or positive viral antigen test
- Rabies, animal or human

- Salmonella

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- Smallpox ■
- Streptococcus pneumoniae, Invasive * Syphilis*
 - Tuberculosis +*
- Tularemia **+**■
- Typhoid and other Salmonella species + \boxtimes Vibrio species infections +
- Viral Hemorrhagic Fevers (e.g., Crimean-Congo, Ebola, Lassa, and Marburg viruses) ■

Reportable to the LA County Dept. of Health Services.

Laboratories receiving specimens for the diagnosis of the diseases must immediately contact the California Dept. of Health Services; for botulism testing call 213-240-7941, for bacterial testing call 510-412-3700, for viral testing call 510-307-8575.

Non-communicable Diseases or Conditions

Alzheimer's Disease and Related Conditions

Disorders Characterized by Lapses of

Pesticide-Related Illnesses (Health and Safety Code. § 105200)

Consciousness * For questions regarding the reporting of HIV/AIDS, STDs, or TB, contact their respective programs:

HIV Epidemiology Program 213-351-8516 www.lapublichealth.org/hiv/index.htm STD Program www.lapublichealth.org/std/index.htm

TB Control Program 213-744-6271 (for reporting) 213-744-6160 (general) www.lapublichealth.org/tb/index.htm

To report a case or outbreak of any disease contact the Communicable Disease Reporting System Hotline Tel: 888-397-3993 • Fax: 888-397-3778 (Rev. 6/03)