

REPORTABLE DISEASES AND CONDITIONS

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

It is the duty of every health care provider, knowing of or in attendance on a case or suspected case of any of the diseases or conditions listed below, to report to the local health officer for the jurisdiction where the patient resides. "Health care provider" encompasses physicians (surgeons, osteopaths, oriental medicine practitioners), veterinarians, podiatrists, physician assistants, registered nurses (nurse practitioners, nurse midwives, school nurses), infection control professionals, medical examiners/coroners, dentists, and chiropractors, as well as any other person with knowledge of a case or suspected case.

Note: This list is specific to Los Angeles County and differs from state and federal reporting requirements ★

☎ Report **immediately** by telephone for both confirmed and suspected cases.

📞 Report by telephone **within 1 working day** from identification **COVID-19 Online Reporting**** OR **COVID-19 Death Online reporting*****

✉ Report by electronic transmission (including FAX or email), telephone or mail within **1 working day** from identification

📧 Report by electronic transmission (including FAX or email), telephone or mail within **7 calendar days** from identification

★ **Mandated by and reportable to the Los Angeles County Department of Public Health**

± If enrolled, report electronically via the **National Healthcare Safety Network** (www.cdc.gov/nhsn/index.html). If not enrolled, use the **LAC DPH CRE Case Report Form** (publichealth.lacounty.gov/acd/Diseases/EpiForms/CRERepSNF.pdf)

■ For TB reporting questions: contact the TB Control Program (213) 745-0800 or visit www.publichealth.lacounty.gov/tb/healthpro.htm

■ For HIV/STD reporting questions: contact the Division of HIV and STD Programs. HIV (213) 351-8516, STDs (213) 368-7441
www.publichealth.lacounty.gov/dhsp/ReportCase.htm

For laboratory reporting: www.publichealth.lacounty.gov/lab/index.htm For veterinary reporting: www.publichealth.lacounty.gov/vet/index.htm

REPORTABLE COMMUNICABLE DISEASES

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|---|--|--|
| 📧 Anaplasmosis | 📧 Giardiasis | ✉ Poliovirus Infection |
| ☎ Anthrax, human or animal | 📧 Gonococcal Infection ■ | ✉ Psittacosis |
| ✉ Babesiosis | ✉ <i>Haemophilus influenzae</i> , invasive disease only, all serotypes, less than 5 years of age | ✉ Q Fever |
| ☎ Botulism: infant, foodborne, or wound | ✉ Hantavirus Infection | ☎ Rabies, human or animal |
| 📧 Brucellosis, animal; except infections due to <i>Brucella canis</i> | ☎ Hemolytic Uremic Syndrome | ✉ Relapsing Fever |
| ☎ Brucellosis, human | ✉ Hepatitis A, acute infection | 📧 Respiratory Syncytial Virus, only deaths in a patient less than 5 years of age |
| ✉ Campylobacteriosis | 📧 Hepatitis B, specify acute, chronic, or perinatal | 📧 Rickettsial Diseases (non-Rocky Mountain Spotted Fever), including Typhus and Typhus-like Illnesses |
| ✉ <i>Candida auris</i> ★ | 📧 Hepatitis C, specify acute, chronic, or perinatal | 📧 Rocky Mountain Spotted Fever |
| 📧 Carbapenem-Resistant <i>Enterobacteriaceae</i> (CRE), including <i>Klebsiella sp.</i> , <i>E. coli</i> , and <i>Enterobacter sp.</i> , in acute care hospitals or skilled nursing facilities ★± | 📧 Hepatitis D (Delta), specify acute or chronic | 📧 Rubella (German Measles) |
| 📧 Chagas Disease ★ | 📧 Hepatitis E, acute infection | 📧 Rubella Syndrome, Congenital |
| 📧 Chancroid ■ | 📧 Human Immunodeficiency Virus (HIV), acute infection ■ (§2641.30-2643.20) | ✉ Salmonellosis, other than Typhoid Fever |
| ☎ Chickenpox (Varicella), only hospitalizations, deaths, and outbreaks (≥3 cases, or one case in a high-risk setting) | 📧 Human Immunodeficiency Virus (HIV) infection, any stage ■* | ☎ Scombroid Fish Poisoning |
| ✉ Chikungunya Virus Infection | 📧 Human Immunodeficiency Virus (HIV) infection, progression to stage 3 (AIDS) ■* | ☎ Shiga Toxin, detected in feces |
| ☎ Cholera | 📧 Influenza-associated deaths in laboratory confirmed cases, all ages ★ | ✉ Shigellosis |
| ☎ Ciguatera Fish Poisoning | ☎ Influenza, due to novel strains, human | ☎ Smallpox (Variola) |
| 📧 Coccidioidomycosis | 📧 Legionellosis | ✉ <i>Streptococcus pneumoniae</i> : Invasive cases only (sterile body site infections) ★ |
| 📞 COVID-19 hospitalizations (COVID-19 Online Reporting**) | 📧 Leprosy (Hansen's Disease) | ✉ <i>Streptococcus pyogenes</i> (Group A <i>Streptococcus</i>): Invasive cases only, including necrotizing fasciitis and STSS ★ |
| 📞 COVID-19, deaths (COVID-19 Death Online Reporting***) | 📧 Leptospirosis | ✉ Syphilis, all stages including congenital ■ |
| 📧 Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform Encephalopathies (TSE) | ✉ Listeriosis | 📧 Tetanus |
| ✉ Cryptosporidiosis | 📧 Lyme Disease | ✉ Trichinosis |
| 📧 Cyclosporiasis | ✉ Malaria | ✉ Tuberculosis ■ |
| 📧 Cysticercosis or Taeniasis | ☎ Measles (Rubeola) | 📧 Tularemia, animal |
| ✉ Dengue Virus Infection | ✉ Meningitis, specify etiology: viral, bacterial, fungal, or parasitic | ☎ Tularemia, human |
| ☎ Diphtheria | ☎ Meningococcal Infection | ✉ Typhoid Fever, cases and carriers |
| ☎ Domoic Acid (Amnesic Shellfish) Poisoning | ☎ Middle East Respiratory Syndrome (MERS) | ✉ <i>Vibrio</i> Infection |
| 📧 Ehrlichiosis | 📧 Mumps | ☎ Viral Hemorrhagic Fevers, human or animal (e.g., Crimean-Congo, Ebola, Lassa and Marburg viruses) |
| ✉ Encephalitis, specify etiology: viral, bacterial, fungal or parasitic | 📧 Myelitis, acute flaccid ★ | ✉ West Nile Virus (WNV) Infection |
| ✉ <i>Escherichia coli</i> , shiga toxin producing (STEC) including <i>E. coli</i> O157 | 📧 Nontuberculosis mycobacteria (extrapulmonary) ★ | ✉ Yellow Fever |
| ☎ Flavivirus infection of undetermined species | ☎ Novel virus infection with pandemic potential | ✉ Yersiniosis |
| ✉ Foodborne Disease | ☎ Paralytic Shellfish Poisoning | ✉ Zika Virus Infection |
| ☎ Foodborne Outbreak; 2 or more suspected cases from separate households with same assumed source | ✉ Paratyphoid Fever | ☎ OCCURRENCE OF ANY UNUSUAL DISEASE |
| | ✉ Pertussis (Whooping Cough) | ☎ OUTBREAKS OF ANY DISEASE, including diseases not listed above. Specify if in an institution and/or the open community. |
| | ☎ Plague, human or animal | |

* Use of FAX for HIV reporting is highly discouraged in order to protect patient confidentiality.

REPORTABLE NON-COMMUNICABLE DISEASES OR CONDITIONS

- 📧 Disorders Characterized by Lapses of Consciousness (CCR § 2806, § 2810) 📧 Cancer, including benign and borderline brain tumors (CCR §2593)
✉ Pesticide-Related Illnesses (Health and Safety Code §105200)

To report a case or outbreak of any disease, contact the Communicable Disease Reporting System
Tel: (888) 397-3993 or (213) 240-7821 • Fax: (888) 397-3778 or (213) 482-5508 • Email: ACDC-MorbidityUnit@ph.lacounty.gov

** COVID-19 Cases Only: COVID19@ph.lacounty.gov • Fax (310) 605-4274 • [COVID-19 Online Reporting](http://www.publichealth.lacounty.gov/COVID-19-Online-Reporting)

*** COVID-19 Deaths Only: COVIDdeath@ph.lacounty.gov • [COVID-19 Death Online Reporting](http://www.publichealth.lacounty.gov/COVID-19-Death-Online-Reporting)

Use secure transmission for emailed reports.

Health Professionals Reporting Webpage: www.publichealth.lacounty.gov/clinicians/report



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Note: This list is specific to Los Angeles County and differs from state and federal reporting requirements ★

☎ Report immediately by telephone (for both confirmed and suspected cases)

OCCURRENCE OF ANY UNUSUAL DISEASE

OUTBREAKS OF ANY DISEASE, including diseases not listed above. Specify if in an institution and/or the open community

- Anthrax, human or animal
- Botulism: infant, foodborne, or wound
- Brucellosis, human
- Chickenpox (Varicella), only hospitalizations, deaths, and outbreaks (≥3 cases, or one case in a high-risk setting)
- Cholera

- Ciguatera Fish Poisoning
- Diphtheria
- Domoic Acid (Amnesic Shellfish) Poisoning
- Flavivirus infection of undetermined species
- Foodborne Outbreak; 2 or more suspected cases from separate households with same assumed source
- Hemolytic Uremic Syndrome
- Influenza, due to novel strains, human
- Measles (Rubeola)
- Meningococcal Infection

- Middle East Respiratory Syndrome (MERS)
- Novel virus infection with pandemic potential
- Paralytic Shellfish Poisoning
- Plague, human or animal
- Rabies, human or animal
- Scombroid Fish Poisoning
- Shiga Toxin, detected in feces
- Smallpox (Variola)
- Tularemia, human
- Viral Hemorrhagic Fevers, human or animal (e.g., Crimean-Congo, Ebola, Lassa and Marburg viruses)

① COVID-19, hospitalizations ([COVID-19 Online Reporting**](#))

① COVID-19, deaths ([COVID-19 Death Online Reporting***](#))

① Human Immunodeficiency Virus (HIV), acute infection (telephone within 1 working day)

✉ Report by electronic transmission (including FAX or email), telephone or mail within 1 working day from identification

- Babesiosis
- Campylobacteriosis
- *Candida auris* ★
- Chikungunya Virus Infection
- Cryptosporidiosis
- Dengue Virus Infection
- Encephalitis, specify etiology: viral, bacterial, fungal or parasitic
- *Escherichia coli*, shiga toxin producing (STEC) including *E. coli* O157
- Foodborne Disease
- *Haemophilus influenzae*, invasive disease only, all serotypes, less than 5 years of age
- Hantavirus Infection
- Hepatitis A, acute infection

- Listeriosis
- Malaria
- Meningitis, specify etiology: viral, bacterial, fungal, or parasitic
- Paratyphoid Fever
- Pertussis (Whooping Cough)
- Pesticide-Related Illnesses (Health and Safety Code §105200)
- Poliovirus Infection
- Psittacosis
- Q Fever
- Relapsing Fever
- Salmonellosis, other than Typhoid Fever
- Shigellosis

- *Streptococcus pneumoniae*: Invasive cases only (sterile body site infections) ★
- *Streptococcus pyogenes* (Group A *Streptococcus*): Invasive cases only, including necrotizing fasciitis and STSS ★
- Syphilis, all stages including congenital
- Trichinosis
- Tuberculosis
- Typhoid Fever, cases and carriers
- *Vibrio* Infection
- West Nile Virus (WNV) Infection
- Yellow Fever
- Yersiniosis
- Zika Virus Infection

📧 Report by electronic transmission (including FAX or email), telephone or mail within 7 calendar days from identification

- Anaplasmosis
- Brucellosis, animal; except infections due to *Brucella canis*
- Cancer, including benign and borderline brain tumors (CCR §2593)*
- Carbapenem-Resistant *Enterobacteriaceae* (CRE), including *Klebsiella sp.*, *E. coli*, and *Enterobacter sp.*, in acute care hospitals or skilled nursing facilities ★±
- Chagas Disease ★
- Chancroid
- Coccidioidomycosis
- Creutzfeldt-Jakob Disease and other Transmissible Spongiform Encephalopathies
- Cyclosporiasis
- Cysticercosis or Taeniasis

- Disorders Characterized by Lapses of Consciousness (CCR § 2806, § 2810)
- Ehrlichiosis
- Giardiasis
- Gonococcal Infection
- Hepatitis B, specify acute, chronic, or perinatal
- Hepatitis C, specify acute, chronic, or perinatal
- Hepatitis D (Delta), specify acute or chronic
- Hepatitis E, acute infection
- Human Immunodeficiency Virus (HIV) infection, any stage **
- Human Immunodeficiency Virus (HIV) infection, progression to stage 3 (AIDS) **
- Influenza-associated deaths in laboratory confirmed cases, all ages ★

- Legionellosis
- Leprosy (Hansen's Disease)
- Leptospirosis
- Lyme Disease
- Mumps
- Myelitis, acute flaccid ★
- Nontuberculosis mycobacteria (extrapulmonary) ★
- Respiratory Syncytial Virus, only deaths in a patient less than 5 years of age
- Rickettsial Diseases (non-Rocky Mountain Spotted Fever), including Typhus and Typhus-like Illnesses
- Rocky Mountain Spotted Fever
- Rubella (German Measles)
- Rubella Syndrome, Congenital
- Tetanus
- Tularemia, animal

*Except basal and squamous skin cancer unless on genital, and carcinoma in-situ and CIN III of the Cervix.

**Use of FAX for HIV reporting is highly discouraged in order to protect patient confidentiality.

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