



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 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 ★

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

Urgency Reporting Requirements

= Report **immediately** by telephone = Report by telephone **within 1** working day

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

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

REPORTABLE DISEASES

- Amebiasis
- Anaplasmosis
- Anthrax, human or animal +
- Babesiosis
- Botulism: infant, foodborne, or wound
- Brucellosis, animal; except infections due to *Brucella canis* +
- Brucellosis, human +
- Campylobacteriosis
- Chancroid ■
- Chickenpox (Varicella), only hospitalizations, deaths, and outbreaks (≥3 cases, or one case in a high-risk setting)
- Chikungunya Virus Infection
- Chlamydia trachomatis* infection, including lymphogranuloma venereum (LGV) ■
- Cholera +
- Ciguatera Fish Poisoning
- Coccidioidomycosis
- Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform Encephalopathies (TSE)
- Cryptosporidiosis
- Cyclosporiasis
- Cysticercosis or Taeniasis
- Dengue Virus Infection
- Diphtheria +
- Domoic Acid (Amnesic Shellfish) Poisoning
- Ehrlichiosis
- Encephalitis, specify etiology: viral, bacterial, fungal or parasitic
- Escherichia coli*, shiga toxin producing (STEC) including *E. coli* O157 +
- Flavivirus infection of undetermined species
- Foodborne Disease
- Foodborne Outbreak; 2 or more suspected cases from separate households with same assumed source
- Giardiasis
- Gonococcal Infection ■
- Haemophilus influenzae*, invasive disease only, all serotypes, less than 5 years of age
- Hantavirus Infection
- Hemolytic Uremic Syndrome
- Hepatitis A, acute infection
- Hepatitis B, specify acute or chronic
- Hepatitis C, specify acute or chronic
- Hepatitis D (Delta), specify acute or chronic
- Hepatitis E, acute infection
- Human Immunodeficiency Virus (HIV) infection, stage 3 (AIDS) ■ (\$2641.30-2643.20)
- Human Immunodeficiency Virus (HIV), acute infection ■ (\$2641.30-2643.20)
- Influenza deaths, laboratory confirmed cases only, all ages ★
- Influenza, novel strains, human
- Legionellosis
- Leprosy (Hansen's Disease)
- Leptospirosis
- Listeriosis +
- Lyme Disease
- Malaria +
- Measles (Rubeola)
- Meningitis, specify etiology: viral, bacterial, fungal, or parasitic
- Meningococcal Infection
- Mumps
- Myelitis, acute flaccid ★
- Novel virus infection with pandemic potential
- Paralytic Shellfish Poisoning
- Pertussis (Whooping Cough)
- Plague, human or animal +
- Poliovirus Infection
- Psittacosis
- Q Fever
- Rabies, human or animal
- Relapsing Fever
- Respiratory Syncytial Virus, only deaths and less than 5 years only
- Rickettsial Diseases (non-Rocky Mountain Spotted Fever), including Typhus and Typhus-like Illnesses
- Rocky Mountain Spotted Fever
- Rubella (German Measles)
- Rubella Syndrome, Congenital
- Salmonellosis, other than Typhoid Fever +
- Scabies, atypical or crusted ★
- Scombroid Fish Poisoning
- Shiga Toxin, detected in feces
- Shigellosis
- Smallpox (Variola)
- Streptococcal Infection, outbreaks any type
- Streptococcal Infection, individual case in a food handler or dairy worker
- Streptococcal Infection, Invasive Group A, including Streptococcal Toxic Shock Syndrome and Necrotizing Fasciitis; **do not** report individual cases of pharyngitis or scarlet fever. ★
- Streptococcus pneumoniae*, invasive ★
- Syphilis ■
- Tetanus
- Trichinosis
- Tuberculosis + ■
- Tularemia, animal
- Tularemia, human +
- Typhoid Fever, cases and carriers +
- Vibrio* Infection +
- Viral Hemorrhagic Fevers, human or animal (e.g., Crimean-Congo, Ebola, Lassa and Marburg viruses)
- West Nile Virus (WNV) Infection
- Yellow Fever
- Yersiniosis
- Zika Virus Infection
- OCCURRENCE OF ANY UNUSUAL DISEASE**
- OUTBREAKS OF ANY DISEASE**, including diseases not listed above. Specify if occurring in an institution and/or the open community.

Reportable Non-Communicable Diseases or Conditions

- Alzheimer's Disease and Related Conditions (CCR § 2802, § 2806, § 2810)
- Disorders Characterized by Lapses of Consciousness (CCR § 2806, § 2810)
- Pesticide-Related Illnesses (Health and Safety Code §105200)

- ★ Reportable to the Los Angeles County Department of Public Health.
- + Bacterial isolates and malarial slides must be forwarded to Los Angeles County Public Health Laboratory for confirmation. Health care providers must still report all such cases separately. **Public Health Laboratory (562) 658-1300**
- For questions regarding the reporting of HIV/AIDS, STDs or TB, contact the respective program:

Division of HIV and STD Programs

HIV reporting (213) 351-8516 **STD reporting** (213) 744-3106
www.publichealth.lacounty.gov/dhsp/ReportCase.htm

TB Control Program

(213) 745-0800
www.publichealth.lacounty.gov/tb/healthpro.htm

To report a case or outbreak of any disease, contact the Communicable Disease Reporting System
Tel: (888) 397-3993 • Fax: (888) 397-3778
www.publichealth.lacounty.gov/acd/Cdrs.htm