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 where the patient resides. “Health care provider” encompasses physicians (surgeons, osteopaths, oriental medicine practitioners), veterinarians, podiatrists, physician assistants, registered nurses (nurse practitioners, 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. COVID-19 deaths are reportable by phone or email.
- Report by telephone within 1 working day from identification.
- Report by electronic transmission (including FAX or email), telephone or mail within 1 working day from identification.
- Mandatory 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.htm).
- For TB reporting questions: contact the TB Control Program (213) 745-0800 or visit 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

- Anaplasmosis
- Anthrax, human or animal
- Babesiosis
- Botulism: infant, foodborne, or wound
- Brucellosis, animal; except infections due to Brucella canis
- Brucellosis, human
- Campylobacteriosis
- Candida auris
- Carbapenem-Resistant Enterobacteriaceae (CRE), including Klebsiella sp., E. coli, and Enterobacter sp., in acute care hospitals or skilled nursing facilities
- Chagas Disease
- Chickenpox (Varicella), only (sterile body site infections)
- Chikungunya Virus Infection
- Cholera
- Ciguatera Fish Poisoning
- Coccidiodomycosis
- Coronavirus Disease 2019 (COVID-19)
- COVID-19, deaths (phone or email)
- Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform Encephalopathies (TSE)
- Cryptosporidiosis
- Cyclosporiasis
- Cysticercosis or Taeniasis
- Dengue Virus Infection
- Diptheria
- Domic 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, 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), acute infection ($2641.30-2643.20)
- 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
- Influenza, due to novel strains, human
- Legionellosis
- Leprosy (Hansen’s Disease)
- Leptospirosis
- Listeriosis
- Lyme Disease
- Malaria
- Measles (Rubella)
- Meningitis, specify etiology: viral, bacterial, fungal, or parasitic
- Meningococcal Infection
- Middle East Respiratory Syndrome (MERS)
- Mumps
- Myelitis, acute flaccid
- Nontuberculosis mycobacteriosis
- Novel virus in population
- Paralytic Shellfish Poisoning
- Paratyphoid Fever
- Pertussis (Whooping Cough)
- Plague, human or animal
- Poliovirus Infection
- Psittacosis
- Q Fever
- Rabies, human or animal
- Relapsing Fever
- Respiratory Syncytial Virus, only deaths in a patient less than 5 years of age
- Rocky Mountain Spotted Fever, including Typhus and Typhus-like Illnesses
- Salmonellosis, other than Typhoid Fever
- Scombroid Fish Poisoning
- Shiga Toxin, detected in feces
- Shigelllosis
- Smallpox (Variola)
- 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
- Tetanus
- Trichinosis
- Tuberculosis
- 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

OUTBREAKS OF ANY DISEASE

- Occurrence of any unusual disease
- Outbreaks of any disease, including diseases not listed above. Specify if in an institution and/or the open community.

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 Reports: ACDC-MorbidityUnit@ph.lacounty.gov

** COVID-19 Cases Only: COVID19@ph.lacounty.gov  ***COVID-19 Deaths Only: COVIDdeath@ph.lacounty.gov

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

- **Coronavirus Disease 2019 (COVID-19), deaths (phone or email)**
- Coronavirus Disease 2019 (COVID-19) (novel coronavirus)
- 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 coronavirus infection with pandemic potential
- Paralytic Shellfish Poisoning
- Plague, human or animal
- Rabies, human or animal
- Scoliombric 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)
- Human Immunodeficiency Virus (HIV), acute infection (telephone within 1 working day)

**OCURRENCE 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 (23 cases, or one case in a high-risk setting)
- Cholera
- Ciguatera Fish Poisoning

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

**Babesiosis**

- Campylobacteriosis
- Candida auris
- Chikungunya Virus Infection
- Coronavirus Disease 2019 (COVID-19)**
- 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

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

- Hepatitis A, acute infection
- Listerosis
- 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
- Shigella
- Streptococcus pneumoniae: Invasive cases only (sterile body site infections)
- Streptococcus pyogenes (Group A Streptococcus): Invasive cases only, including necrotizing fasciitis and STSS
- 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

*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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