



LAC DPH Health Information: Changes to Reportable Diseases and Conditions in LA County

December 12, 2019



*This message is intended for all healthcare providers in Los Angeles County
Please distribute as appropriate.*

Key Messages

- The Los Angeles County Department of Public Health (LAC DPH) has made multiple changes to the list of mandated reportable diseases and conditions, including the addition of several new reportable diseases.
- All health care providers in LA County are asked to use the November 2019 [LAC DPH Reportable Diseases and Conditions List](#) and discard all previous versions, and to review the summary of changes outlined below.
- The LAC DPH list of mandated reportable diseases and conditions is specific to LA County and differs from state reporting requirements.

Background

California law mandates that health care providers must report certain diseases and conditions to the local health officer for the jurisdiction where the patient resides. The California Department of Public Health recently updated Title 17 sections 2500 and 2505 of the California Code of Regulations which went into effect October 1, 2019.

LAC DPH reviews the list of state mandated reportable diseases and conditions and, based upon local disease trends and surveillance needs, creates the [LAC DPH Reportable Diseases and Conditions List](#).

The following is a summary of the significant changes.

Deletions from List for Health Care Providers

The following diseases have been **removed** and are no longer reportable to LAC DPH:

- Amebiasis
- *Chlamydia trachomatis* infections, including lymphogranuloma venereum (LGV). Note: [laboratories](#) are still mandated to report *Chlamydia trachomatis* to LAC DPH.
- Streptococcal infections (outbreaks of any type and individual cases in food handlers and dairy workers). Note that invasive cases of *Streptococcus pneumoniae* and *Streptococcus pyogenes* (Group A Streptococcus) are still reportable (see list for details).

Additions to List for Health Care Providers

The following diseases have been **added** and are now required to be reported to LAC DPH within a specific timeframe (those with a star are LAC DPH-specific reporting mandates):

- *Candida auris** — report within one (1) working day
- Chagas disease* — report within seven (7) calendar days
- Human Immunodeficiency Virus (HIV) infection, any stage — report within seven (7) calendar days
- Middle East Respiratory Syndrome (MERS) — report immediately by telephone
- Nontuberculous mycobacteria, extrapulmonary* — report within seven (7) calendar days
- Paratyphoid fever — report within one (1) working day

Resources



LAC DPH Health Professionals Reporting Webpage

This webpage summarizes how professionals can report diseases and conditions (including animal bites) and includes links to reporting forms and phone numbers and the laboratory reporting list.

publichealth.lacounty.gov/clinicians/report



LAC DPH Reportable Diseases and Conditions List (Nov. 2019)

Page 1: standard alphabetized format

Page 2: categorized by priority

Scroll down to see full printable version.

publichealth.lacounty.gov/acd/docs/ReportableDiseaseListNov2019.pdf

For questions regarding the LAC DPH reporting list, email acdc2@ph.lacounty.gov.

This communication was sent by Dawn Terashita MD, MPH, Associate Director, Acute Communicable Disease Control, Los Angeles County Department of Public Health.

To view this and other communications or to sign-up to receive LAHANs, please visit <http://publichealth.lacounty.gov/lahan>

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
- ✉ 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
- ★ **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 | ✉ <i>Haemophilus influenzae</i> , invasive disease only, all serotypes, less than 5 years of age | ✉ Poliovirus Infection |
| ☎ Anthrax, human or animal | ✉ Hantavirus Infection | ✉ Psittacosis |
| ✉ Babesiosis | ☎ Hemolytic Uremic Syndrome | ✉ Q Fever |
| ☎ Botulism: infant, foodborne, or wound | ✉ Hepatitis A, acute infection | ☎ Rabies, human or animal |
| 📧 Brucellosis, animal; except infections due to <i>Brucella canis</i> | 📧 Hepatitis B, specify acute, chronic, or perinatal | ✉ Relapsing Fever |
| ☎ Brucellosis, human | 📧 Hepatitis C, specify acute, chronic, or perinatal | 📧 Respiratory Syncytial Virus, only deaths in a patient less than 5 years of age |
| ✉ Campylobacteriosis | 📧 Hepatitis D (Delta), specify acute or chronic | 📧 Rickettsial Diseases (non-Rocky Mountain Spotted Fever), including Typhus and Typhus-like Illnesses |
| ✉ <i>Candida auris</i> ★ | 📧 Hepatitis E, acute infection | 📧 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 ★ ± | 📧 Human Immunodeficiency Virus (HIV), acute infection ■ (§2641.30-2643.20) | 📧 Rubella (German Measles) |
| 📧 Chagas Disease ★ | 📧 Human Immunodeficiency Virus (HIV) infection, any stage ■* | 📧 Rubella Syndrome, Congenital |
| 📧 Chancroid ■ | 📧 Human Immunodeficiency Virus (HIV) infection, progression to stage 3 (AIDS) ■* | ✉ Salmonellosis, other than Typhoid Fever |
| ☎ Chickenpox (Varicella), only hospitalizations, deaths, and outbreaks (≥3 cases, or one case in a high-risk setting) | 📧 Influenza-associated deaths in laboratory confirmed cases, all ages ★ | ☎ Scombroid Fish Poisoning |
| ✉ Chikungunya Virus Infection | ☎ Influenza, due to novel strains, human | ☎ Shiga Toxin, detected in feces |
| ☎ Cholera | 📧 Legionellosis | ✉ Shigellosis |
| ☎ Ciguatera Fish Poisoning | 📧 Leprosy (Hansen's Disease) | ☎ Smallpox (Variola) |
| 📧 Coccidioidomycosis | 📧 Leptospirosis | ✉ <i>Streptococcus pneumoniae</i> : Invasive cases only (sterile body site infections) ★ |
| 📧 Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform Encephalopathies (TSE) | ✉ Listeriosis | ✉ <i>Streptococcus pyogenes</i> (Group A <i>Streptococcus</i>): Invasive cases only, including necrotizing fasciitis and STSS ★ |
| ✉ Cryptosporidiosis | 📧 Lyme Disease | ✉ Syphilis, all stages including congenital ■ |
| 📧 Cyclosporiasis | ✉ Malaria | 📧 Tetanus |
| 📧 Cysticercosis or Taeniasis | ☎ Measles (Rubeola) | ✉ Trichinosis |
| ✉ Dengue Virus Infection | ✉ Meningitis, specify etiology: viral, bacterial, fungal, or parasitic | ✉ Tuberculosis ■ |
| ☎ Diphtheria | ☎ Meningococcal Infection | 📧 Tularemia, animal |
| ☎ Domoic Acid (Amnesic Shellfish) Poisoning | ☎ Middle East Respiratory Syndrome (MERS) | ☎ Tularemia, human |
| 📧 Ehrlichiosis | 📧 Mumps | ✉ Typhoid Fever, cases and carriers |
| ✉ Encephalitis, specify etiology: viral, bacterial, fungal or parasitic | 📧 Myelitis, acute flaccid ★ | ✉ <i>Vibrio</i> Infection |
| ✉ <i>Escherichia coli</i> , shiga toxin producing (STEC) including <i>E. coli</i> O157 | 📧 Nontuberculous mycobacteria (extrapulmonary) ★ | ☎ Viral Hemorrhagic Fevers, human or animal (e.g., Crimean-Congo, Ebola, Lassa and Marburg viruses) |
| ☎ Flavivirus infection of undetermined species | ☎ Novel virus infection with pandemic potential | ✉ West Nile Virus (WNV) Infection |
| ✉ Foodborne Disease | ☎ Paralytic Shellfish Poisoning | ✉ Yellow Fever |
| ☎ Foodborne Outbreak; 2 or more suspected cases from separate households with same assumed source | ✉ Paratyphoid Fever | ✉ Yersiniosis |
| 📧 Giardiasis | ✉ Pertussis (Whooping Cough) | ✉ Zika Virus Infection |
| 📧 Gonococcal Infection ■ | ☎ Plague, human or animal | ☎ OCCURRENCE OF ANY UNUSUAL DISEASE |

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

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

REPORTABLE NON-COMMUNICABLE DISEASES OR CONDITIONS

- 📧 Disorders Characterized by Lapses of Consciousness (CCR § 2806, § 2810)
- ✉ Pesticide-Related Illnesses (Health and Safety Code §105200)
- 📧 Cancer, including benign and borderline brain tumors (except basal and squamous skin cancer unless on genital, and carcinoma in-situ and CIN III of the Cervix) CCR §2593

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

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

✉ Report by electronic transmission (including FAX), 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

⑦ Report by electronic transmission (including FAX), 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 ★
- Nontuberculous 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
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