

Title 17, California Code of Regulations (CCR) §2500, §2593, §2641.5-2643.20, and §2800-2812 Reportable Diseases and Conditions*

§ 2500. REPORTING TO THE LOCAL HEALTH AUTHORITY.

- **§ 2500(b)** It shall be the duty of every health care provider, knowing of or in attendance on a case or suspected case of any of the diseases or condition 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 to the local health officer for the jurisdiction where the patient resides.
- **§ 2500(c)** The administrator of each health facility, clinic, or other setting where more than one health care provider may know of a case, a suspected case or an outbreak of disease within the facility shall establish and be responsible for administrative procedures to assure that reports are made to the local officer.
- **§ 2500(a)(14)** "Health care provider" means a physician and surgeon, a veterinarian, a podiatrist, a nurse practitioner, a physician assistant, a registered nurse, a nurse midwife, a school nurse, an infection control practitioner, a medical examiner, a coroner, or a dentist.

URGENCY REPORTING REQUIREMENTS [17 CCR §2500(h)(I)]

- ⓪ ! = Report immediately by telephone (designated by a ♦ in regulations).
- † = Report immediately by telephone when two or more cases or suspected cases of foodborne disease from separate households are suspected to have the same source of illness (designated by a ● in regulations.)
- FAX ⓪ ☒ = Report by electronic transmission (including FAX), telephone, or mail within one working day of identification (designated by a + in regulations).
- = All other diseases/conditions should be reported by electronic transmission (including FAX), telephone, or mail within seven calendar days of identification.

REPORTABLE COMMUNICABLE DISEASES §2500(i)(1)

	Acquired Immune Deficiency Syndrome (AIDS) (HIV infection only; see "Human Immunodeficiency Virus")	FAX ⓪ ☒ Q Fever
		⓪ ! Rabies, human or animal
FAX ⓪ ☒	Amebiasis	FAX ⓪ ☒ Relapsing Fever
	Anaplasmosis/Ehrlichiosis	Rickettsial Diseases (non-Rocky Mountain Spotted Fever), including Typhus and Typhus-like Illnesses
⓪ !	Anthrax, human or animal	Rocky Mountain Spotted Fever
FAX ⓪ ☒	Babesiosis	Rubella (German Measles)
⓪ !	Botulism (Infant, Foodborne, Wound, Other)	Rubella Syndrome, Congenital
	Brucellosis, animal (except infections due to <i>Brucella canis</i>)	FAX ⓪ ☒ Salmonellosis (Other than Typhoid Fever)
⓪ !	Brucellosis, human	⓪ ! Scombroid Fish Poisoning
FAX ⓪ ☒	Campylobacteriosis	⓪ ! Severe Acute Respiratory Syndrome (SARS)
	Chancroid	⓪ ! Shiga toxin (detected in feces)
FAX ⓪ ☒	Chickenpox (Varicella) (only hospitalizations and deaths)	FAX ⓪ ☒ Shigellosis
	<i>Chlamydia trachomatis</i> infections, including lymphogranuloma venereum (LGV)	⓪ ! Smallpox (Variola)
⓪ !	Cholera	FAX ⓪ ☒ <i>Staphylococcus aureus</i> infection (only a case resulting in death or admission to an intensive care unit of a person who has not been hospitalized or had surgery, dialysis, or residency in a long-term care facility in the past year, and did not have an indwelling catheter or percutaneous medical device at the time of culture)
⓪ !	Ciguatera Fish Poisoning	FAX ⓪ ☒ Streptococcal Infections (Outbreaks of Any Type and Individual Cases in Food Handlers and Dairy Workers Only)
	Coccidioidomycosis	FAX ⓪ ☒ Syphilis
	Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform Encephalopathies (TSE)	Tetanus
FAX ⓪ ☒	Cryptosporidiosis	Toxic Shock Syndrome
	Cyclosporiasis	FAX ⓪ ☒ Trichinosis
	Cysticercosis or taeniasis	FAX ⓪ ☒ Tuberculosis
⓪ !	Dengue	Tularemia, animal
⓪ !	Diphtheria	⓪ ! Tularemia, human
⓪ !	Domoic Acid Poisoning (Amnesic Shellfish Poisoning)	FAX ⓪ ☒ Typhoid Fever, Cases and Carriers
FAX ⓪ ☒	Encephalitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic	FAX ⓪ ☒ <i>Vibrio</i> Infections
⓪ !	<i>Escherichia coli</i> : shiga toxin producing (STEC) including <i>E. coli</i> O157	⓪ ! Viral Hemorrhagic Fevers, human or animal (e.g., Crimean-Congo, Ebola, Lassa, and Marburg viruses)
† FAX ⓪ ☒	Foodborne Disease	FAX ⓪ ☒ West Nile virus (WNV) Infection
	Giardiasis	⓪ ! Yellow Fever
	Gonococcal Infections	FAX ⓪ ☒ Yersiniosis
FAX ⓪ ☒	<i>Haemophilus influenzae</i> , invasive disease (report an incident of less than 15 years of age)	⓪ ! OCCURRENCE of ANY UNUSUAL DISEASE
⓪ !	Hantavirus Infections	⓪ ! OUTBREAKS of ANY DISEASE (Including diseases not listed in § 2500). Specify if institutional and/or open community.
⓪ !	Hemolytic Uremic Syndrome	
FAX ⓪ ☒	Hepatitis A, acute infection	
	Hepatitis B (specify acute case or chronic)	
	Hepatitis C (specify acute case or chronic)	
	Hepatitis D (Delta) (specify acute case or chronic)	
	Hepatitis E, acute infection	
	Influenza, deaths in laboratory-confirmed cases for age 0-64 years	
	Influenza, novel strains (human)	
	Legionellosis	
	Leprosy (Hansen Disease)	
FAX ⓪ ☒	Leptospirosis	
	Listeriosis	
	Lyme Disease	
FAX ⓪ ☒	Malaria	
⓪ !	Measles (Rubeola)	
FAX ⓪ ☒	Meningitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic	
⓪ !	Meningococcal Infections	
	Mumps	
⓪ !	Paralytic Shellfish Poisoning	
	Pelvic Inflammatory Disease (PID)	
FAX ⓪ ☒	Pertussis (Whooping Cough)	
⓪ !	Plague, human or animal	
FAX ⓪ ☒	Poliovirus Infection	
FAX ⓪ ☒	Psittacosis	

HIV REPORTING BY HEALTH CARE PROVIDERS § 2641.5-2643.20

Human Immunodeficiency Virus (HIV) infection is reportable by traceable mail or person-to-person transfer within seven calendar days by completion of the HIV/AIDS Case Report form (CDPH 8641 A) available from the local health department. For completing HIV-specific reporting requirements, see Title 17, CCR, § 2641.5-2643.20 and <http://www.cdph.ca.gov/programs/aids/Pages/OAHIVReporting.aspx>

REPORTABLE NONCOMMUNICABLE DISEASES AND CONDITIONS §2800-2812 and §2593(b)

Disorders Characterized by Lapses of Consciousness (§2800-2812)
Pesticide-related illness or injury (known or suspected cases)**
Cancer, including benign and borderline brain tumors (except (1) basal and squamous skin cancer unless occurring on genitalia, and (2) carcinoma in-situ and CIN III of the Cervix) (§2593)***

LOCALLY REPORTABLE DISEASES (If Applicable):

* This form is designed for health care providers to report those diseases mandated by Title 17, California Code of Regulations (CCR). Failure to report is a misdemeanor (Health & Safety Code §120295) and is a citable offense under the Medical Board of California Citation and Fine Program (Title 16, CCR, §1364.10 and 1364.11).

** Failure to report is a citable offense and subject to civil penalty (\$250) (Health and Safety Code §105200).

*** The Confidential Physician Cancer Reporting Form may also be used. See Physician Reporting Requirements for Cancer Reporting in CA at: www.ccrca.org.