UTAH REPORTABLE DISEASES

Utah law requires that these diseases be reported to your local health department or the Utah Department of Health immediately (within 24 hours after identification).

- Anthrax* (Bacillus anthracis)
- Botulism* (Clostridium botulinum)
- Cholera (Vibrio cholerae)
- Diphtheria* (Corynebacterium diphtheriae)
- Haemophilus influenzae, * invasive disease
- Hepatitis A
- Influenza infection, non-seasonal strain*
- Measles* (Rubeola virus)
- Meningococcal disease* (Neisseria meningitidis)

- Plague* (Yersinia pestis)
- Poliomyelitis, paralytic and non-paralytic
- Rabies (human and animal)
- Rubella (excluding congenital syndrome)
- Severe acute respiratory syndrome (SARS)
- Smallpox (Variola virus)
- Staphylococcus aureus, with resistance (VRSA) or intermediate resistance (VISA) to vancomycin*
- · Transmissible spongiform encephalopathies
- (prion diseases), including Creutzfeldt-Jakob disease
- Tuberculosis* (Mycobacterium tuberculosis complex)
- Tularemia* (Francisella tularensis)
- Typhoid, cases and carriers
- Viral hemorrhagic fevers, including Ebola, Lassa, Marburg, and Nipah virus-related illnesses
- · Yellow fever

ALSO IMMEDIATELY REPORTABLE: UNUSUAL DISEASES OR OUTBREAKS OF ANY KIND AND ANY EXPOSURE/INFECTION THAT MAY INDICATE A BIOTERRORISM EVENT

Utah law requires that these diseases be reported to your local health department or the Utah Department of Health within three (3) days after identification.

- Acute flaccid myelitis (AFM)
- Adverse event resulting from smallpox vaccination (Vaccinia virus)
- Anaplasmosis (*Anaplasma* phagocytophilum)
- Arbovirus infection, including Chikungunya, West Nile*, and Zika virus*
- Babesiosis (Babesia)
- Botulism, infant* (*Clostridium botulinum*)
- Brucellosis* (Brucella species)
- Campylobacteriosis* (Campylobacter)
- Carbapenem-resistant or carbapenemase producing Acinetobacter species, Enterobacter species, Escherichia coli, and Klebsiella species
- Chancroid (Haemophilus ducreyi)
- Chickenpox (Varicella-zoster virus)
- Chlamydia trachomatis infection
- Coccidioidomycosis (Coccidioides)
- · Colorado tick fever
- Cryptosporidiosis (Cryptosporidium)
- Cyclosporiasis (Cyclospora cayetanensis)
- Dengue fever
- Ehrlichiosis (Ehrlichia)
- Encephalitis

- Shiga toxin-producing Escherichia coli (STEC) infection*
- Giardiasis (Giardia lamblia)
- Gonorrhea (Neisseria gonorrhoeae) sexually transmitted and ophthalmia neonatorum
- Hantavirus infection (Sin Nombre virus)
- Hemolytic uremic syndrome, post-diarrheal
- Hepatitis, viral, including hepatitis B (acute, chronic and perinatal), C, D, and E
- Human immunodeficiency virus (HIV) infection, including perinatal and acquired immunodeficiency syndrome (AIDS) diagnosis
- Influenza-associated hospitalization*
- Influenza-associated death in a person less than 18 years of age
- Legionellosis* (Legionella)
 Leprosy (Hansen's Disease)
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- Leptospirosis (*Leptospira*)
- Listerosis* (*Listeria monocytogenes*)
- Lyme disease (Borrelia burgdorferi)
- Malaria (Plasmodium)
- Meningitis (aseptic, bacterial, fungal, parasitic, protozoan and viral)

- Mumps
- Mycobacteria other than tuberculosis*
- Pertussis (Bordetella pertussis)
- Pregnancy associated with a Hepatitis B, Hepatitis C, HIV, Listeria, Rubella, Syphilis, or Zlka virus infection
- Psittacosis (Chlamydophila psittaci)
- Q Fever (Coxiella burnetii)
- Relapsing fever, tick-borne and louse-borne (*Borrelia*)
- Rubella, including congenital syndrome
- Salmonellosis* (Salmonella)
- Shigellosis* (Shigella)
- Spotted fever rickettsioses, including Rocky Mountain spotted fever (*Rickettsia*)
- Streptococcal disease, invasive, due to Streptococcus pneumoniae and Groups A and B
- Syphilis, all stages and congenital
- Tetanus (Clostridium tetani)
- Toxic shock syndrome, staphylococcal or streptococcal
- Trichinellosis (Trichinella)
- Vibriosis* (Vibrio), including Cholera

Reportable diseases through Electronic Laboratory Reporting (ELR) for participating laboratories and hospitals

- · Clostridium difficile
- CD4+ T-Lymphocyte tests
- Cytomegalovirus (CMV), congenital
- Liver function tests, including ALT, AST, and bilirubin associated with a viral hepatitis case
- · Norovirus infection
- Streptococcal disease, invasive

*Laboratories shall submit clinical material to the Utah Public Health Laboratory for all cases identified with these organisms, or any organism implicated in an outbreak when instructed by authorized local or state health department staff. Diseases may be reported to your <u>local health department</u> or the Utah Department of Health (UDOH) by fax (801-538-9923), email (reporting@utah.gov) or telephone (1-888-EPI-UTAH). Email reports should be sent encrypted, through a secure email system. Reports sent without encryption risk breach of confidentiality. The UDOH cannot guarantee the security of information submitted without encryption. For questions about disease reporting, email the Utah Department of Health at reporting@utah.gov, call 801-538-6191 or visit http://health.utah.gov/epi/reporting.

