# Report incidences of the following infections, diseases, or conditions to the Indiana State Department of Health (ISDH)

## Telephone: 317.233.7125 or Facsimile: 317.234.2812

#### Section I. Reportable Communicable Diseases and Conditions

#### Effective December 12, 2008

410 IAC 1-2.3-47

Report items in BOLD immediately. Report items with an asterisk (\*) within 24 hours. Report all others within 72 hours.

Acquired immunodeficiency syndrome Hepatitis, viral, Type A (AIDS) \*Animal bites Anthrax Babesiosis **Botulism** Brucellosis Campylobacteriosis Chancroid Chlamydia trachomatis, genital infection Cholera Cryptosporidiosis Cyclospora Diphtheria Ehrlichiosis Encephalitis, arboviral, including: California encephalitis; Dengue or dengue hemorrhagic fever; Eastern equine encephalitis (EEE); Powassan encephalitis; St. Louis encephalitis (SLE); West Nile encephalitis; or Western equine encephalitis (WEE) Escherichia coli, diarrhea producing and other enterohemorrhagic types, including, but not limited to: E. coli 0157; E. coli O157:H7; Shiga-toxin producing; or Sorbitol-negative Giardiasis Gonorrhea Granuloma inguinale Haemophilus influenzae, invasive disease Hansen's disease (leprosy) Hantavirus pulmonary syndrome Hemolytic uremic syndrome, postdiarrheal

Hepatitis, viral, Type B Hepatitis, viral, Type B, pregnant woman (acute and chronic) or perinatally exposed infant Hepatitis, viral, Type C (acute), within five (5) business days Hepatitis, viral, Type Delta Hepatitis, viral, Type E Hepatitis, viral, unspecified Histoplasmosis HIV infection/disease HIV infection/disease, pregnant woman or perinatally exposed infant Influenza-associated death (all ages) Legionellosis Leptospirosis Listeriosis Lvme disease Lymphogranuloma venereum Malaria Measles (rubeola) Meningococcal disease, invasive Mumps Neonatal herpes Pertussis Plague Poliomyelitis Psittacosis Q Fever Rabies in humans or animals Confirmed and suspect animal with human exposure Rabies, postexposure treatment Rocky Mountain spotted fever Rubella (German measles) Rubella congenital syndrome Salmonellosis, non-typhoidal

Shigellosis Smallpox (variola infection) Adverse events or complications due to smallpox vaccination (vaccinia virus infection) or secondary transmission to others after vaccination. This includes accidental implantation at sites other than the vaccination site, secondary bacterial infections at the vaccination site, vaccinia keratitis, eczema vaccinatum, generalized vaccinia, congenital vaccinia, progressive vaccinia, vaccinia encephalitis, death due to vaccinia complications, and other complications requiring significant medical intervention. Staphylococcus aureus, vancomycin

#### resistance level of MIC > 8 μg/mL or severe Staphylococcus aureus in a previously healthy person Streptococcus pneumoniae, invasive

- disease and antimicrobial resistance pattern Streptococcus, Group A, invasive disease
- Streptococcus, Group B, invasive disease Syphilis Tetanus Toxic shock syndrome (streptococcal or staphylococcal)

#### Trichinosis

Tuberculosis, cases and suspects Tularemia Typhoid fever, cases and carriers Typhus, endemic (flea-borne) Varicella (chicken pox)

Vibriosis (non-cholera) Yellow fever Yersiniosis

# Other Reportable Conditions and Diseases of Public Health Significance

## Immediately report outbreaks of any of the following upon suspicion:

- Any disease required to be reported under this section 1.
- Newborns with diarrhea in hospitals or other institutions 2.
- Foodborne or waterborne diseases in addition to those specified by name in this rule 3.
- Streptococcal illnesses 4.
- 5. Conjunctivitis
- 6. Impetigo
- Nosocomial disease within hospitals and health care facilities 7.
- Influenza-like-illness 8.
- Viral meningitis 9.
- 10. Unusual occurrence of disease
- Any disease (e.g. anthrax, plague, tularemia, Brucella species, smallpox, or botulism) or chemical illness that is considered a 11. bioterrorism threat, importation, or laboratory release.

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#### Section II. Medical Laboratory Reporting

## Effective December 12, 2008

#### 410 IAC 1-2.3-48

Report laboratory findings demonstrating evidence of the following infections, diseases, or conditions at least weekly.

Arboviruses, including, but not limited to: California encephalitis; Dengue or dengue hemorrhagic fever; Eastern equine encephalitis (EEE); Japanese B encephalitis; Powassan encephalitis; St. Louis encephalitis (SLE);	<i>Escherichia coli</i> , diarrhea producing and other enterohemorrhagic types, including, but not limited to: <i>E. coli</i> O157; <i>E. coli</i> O157:H7; Shiga-toxin producing; or Sorbitol-negative	Neisseria meningitidis, invasive disease Nocardia species and antimicrobial resistance pattern Plasmodium species Pneumocystis carinii Poliomyelitis Rabies virus (animal or human)
West Nile encephalitis;	Francisella tularensis	Rickettsia species
Western equine encephalitis (WEE); or	Giardia lamblia	Rubella virus
Yellow fever	Haemophilus ducreyi	Salmonella species
Babesia species Bacillus anthracis	Haemophilus influenzae, invasive disease Hantavirus	Shigella species and antimicrobial resistance pattern
Bordetella pertussis	Hepatitis viruses:	Smallpox
Borrelia burgdorferi	Anti-HAV IgM;	Staphylococcus aureus, vancomycin
Brucella species	HBsAg, HBeAg, or IgM anti-HBc;	resistance level of MIC $\geq$ 8 µg/mL
Calymmatobacterium granulomatis	RIBA, RNA, or anti-HCV (or any	Streptococcus pneumoniae, invasive
Campylobacter species	combination); Delta; or	disease, and antimicrobial resistance
Chlamydia psittaci Chlamydia trachomatis	Anti-HEV IgM or IgG	pattern <i>Streptococcus</i> Group A
Clostridium botulinum	Herpes simplex virus (neonatal)	(e.g. Streptococcus pyogenes), invasive
Clostridium tetani	Histoplasmosis capsulatum	disease
Corynebacterium diphtheriae	HIV and related retroviruses	Streptococcus Group B,
Coxiella burnetii	Influenza	(e.g. Streptococcus agalactiae), invasive
Cryptococcus neoformans	Kaposi's sarcoma (biopses)	disease
Cryptosporidium parvum	Legionella species	Treponema pallidum
Cyclospora cayetanensis Ehrlichia chaffeensis	Leptospira species Listeria monocytogenes	Trichinella spiralis Vibrio species
Ehrlichia phagocytophila	Measles virus	Yersinia species, including:
	Mumps virus	pestis;
	Mycobacterium tuberculosis	enterocolitica; or
	Neisseria gonorrhoeae	pseudotuberculosis

Reporting is required of any specimen derived from the human body that yields microscopic, bacteriologic, immunologic, serologic, or other evidence of infection by any of the organisms or agents listed.

Reporting shall include the following epidemiological and testing data:

- 1. Name, date, results of test performed, the laboratory's normal limits for the test, the laboratory's interpretation of the test results, and the laboratory's accession number or other numeric identifier
- 2. Name, address, and date of birth or age, if date of birth is not available, of the person from whom the specimen was obtained
- 3. Name, address, and telephone number of attending physician, hospital, clinic, or other specimen submitter
- 4. Name, address, telephone number, and CLIA ID number of the laboratory performing the test

# Laboratories shall submit all isolates of the following organisms to the department's microbiology laboratory for further evaluation <u>within five (5) business days</u> of isolation:

- 1. Haemophilus influenzae, invasive disease
- 2. Neisseria meningitidis, invasive disease
- 3. Escherichia coli O157:H7; shiga-toxin producing; or sorbitol-negative E. coli isolates
- 4. Staphylococcus aureus, vancomycin resistance level of MIC ≥ 8 μg/mL
- 5. Mycobacterium tuberculosis
- 6. Streptococcus pneumoniae, invasive disease, isolates from persons less than five (5) years of age
- 7. Nocardia
- 8. Listeria monocytogenes
- 9. Salmonella isolates from stool, urine, blood, or other sterile sites