

Title 17, California Code of Regulations (CCR) §2500, §2593, §2641-2643, 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 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. 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)]

☎ = 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 ☎ ☒ = Report by FAX, telephone, or mail within one working day of identification (designated by a + in regulations).

= All other diseases/conditions should be reported by FAX, telephone, or mail within seven calendar days of identification.

REPORTABLE COMMUNICABLE DISEASES §2500(j)(1), §2641-2643

	Acquired Immune Deficiency Syndrome (AIDS) (HIV infection only: see "Human Immunodeficiency Virus")			
FAX ☎ ☒	Amebiasis	FAX ☎ ☒	☎	Pelvic Inflammatory Disease (PID)
	☎	FAX ☎ ☒	☎	Pertussis (Whooping Cough)
	Anthrax	FAX ☎ ☒	☎	Plague, Human or Animal
FAX ☎ ☒	Avian Influenza (human)	FAX ☎ ☒	☎	Poliomyelitis, Paralytic
	Babesiosis	FAX ☎ ☒	☎	Psittacosis
	☎	FAX ☎ ☒	☎	Q Fever
	Botulism (Infant, Foodborne, Wound)		☎	Rabies, Human or Animal
	Brucellosis	FAX ☎ ☒	☎	Relapsing Fever
FAX ☎ ☒	Campylobacteriosis		☎	Rheumatic Fever, Acute
	Chancroid		☎	Rocky Mountain Spotted Fever
FAX ☎ ☒	Chickenpox (only hospitalizations and deaths)		☎	Rubella (German Measles)
	Chlamydial Infections, including Lymphogranulom Venereum (LGV)		☎	Rubella Syndrome, Congenital
	☎	FAX ☎ ☒	☎	Salmonellosis (Other than Typhoid Fever)
	Cholera		☎	Scombrotoxic Fish Poisoning
	Ciguatera Fish Poisoning		☎	Severe Acute Respiratory Syndrome (SARS)
	Coccidioidomycosis		☎	Shiga toxin (detected in feces)
FAX ☎ ☒	Colorado Tick Fever	FAX ☎ ☒	☎	Shigellosis
FAX ☎ ☒	Conjunctivitis, Acute Infectious of the Newborn, Specify Etiology	FAX ☎ ☒	☎	Smallpox (Variola)
	Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform Encephalopathies (TSE)	FAX ☎ ☒	☎	Streptococcal Infections (Outbreaks of Any Type and Individual Cases in Food Handlers and Dairy Workers Only)
FAX ☎ ☒	Cryptosporidiosis		☎	Syphilis
	Cysticercosis or Taeniasis		☎	Tetanus
	☎		☎	Toxic Shock Syndrome
	Dengue		☎	Toxoplasmosis
	Diarrhea of the Newborn, Outbreak		☎	Trichinosis
	Diphtheria	FAX ☎ ☒	☎	Tuberculosis
	☎		☎	Tularemia
	Domoic Acid Poisoning (Amnesic Shellfish Poisoning)	FAX ☎ ☒	☎	Typhoid Fever, Cases and Carriers
	Ehrlichiosis		☎	Typhus Fever
FAX ☎ ☒	Encephalitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic		☎	Vibrio Infections
† FAX ☎ ☒	<i>Escherichia coli</i> : shiga toxin producing (STEC) including <i>E. coli</i> O157		☎	Viral Hemorrhagic Fevers (e.g., Crimean-Congo, Ebola, Lassa, and Marburg viruses)
	Foodborne Disease		☎	Water-Associated Disease (e.g., Swimmer's Itch or Hot Tub Rash)
	Giardiasis	FAX ☎ ☒	☎	West Nile Virus (WNV) Infection
	Gonococcal Infections		☎	Yellow Fever
FAX ☎ ☒	<i>Haemophilus influenzae</i> invasive disease (report an incident less than 15 years of age)		☎	Yersiniosis
	☎		☎	OCCURRENCE of ANY UNUSUAL DISEASE
	Hantavirus Infections		☎	OUTBREAKS of ANY DISEASE (Including diseases not listed in §2500). Specify if institutional and/or open community.
	☎			
	Hemolytic Uremic Syndrome			
	Hepatitis, Viral			
FAX ☎ ☒	Hepatitis A			
	Hepatitis B (specify acute case or chronic)			
	Hepatitis C (specify acute case or chronic)			
	Hepatitis D (Delta)			
	Hepatitis, other, acute			
	Human Immunodeficiency Virus (HIV) (§2641-2643)			
	Influenza deaths (report an incident of less than 18 years of age)			
	Kawasaki Syndrome (Mucocutaneous Lymph Node Syndrome)			
	Legionellosis			
	Leprosy (Hansen Disease)			
	Leptospirosis			
FAX ☎ ☒	Listeriosis			
	Lyme Disease			
FAX ☎ ☒	Malaria			
FAX ☎ ☒	Measles (Rubeola)			
FAX ☎ ☒	Meningitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic			
	☎			
	Meningococcal Infections			
	Mumps			
	☎			
	Paralytic Shellfish Poisoning			

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

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

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 and 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).