

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