

## IDAHO REPORTABLE DISEASE LIST

<http://www.epi.idaho.gov>

Health care providers, laboratorians, and hospital administrators must report the following diseases and conditions to their local public health district or the Epidemiology Program within the Bureau of Communicable Disease Prevention per IDAPA 16.02.10. Reports must be made within three (3) working days of identification or diagnosis unless otherwise noted below.

Idaho Reportable Diseases (IDAPA 16.02.10): <http://adminrules.idaho.gov/rules/current/16/0210.pdf>

### **Bacterial Diseases**

**Anthrax (immediately)\***

**Botulism: foodborne, infant, other (immediately)\***

**Brucellosis (1 day)\***

Campylobacteriosis

Chancroid

*Chlamydia trachomatis*

**Cholera (1 day)\***

**Diphtheria (immediately)\***

***E. coli* O157:H7 and other toxigenic non-O157 strains (1 day)\***

Gonorrhea (*Neisseria gonorrhoeae*)

***Haemophilus influenzae*, invasive disease (1 day)\***

Legionellosis / Legionnaire's disease

Leprosy (Hansen's disease)

Leptospirosis

Listeriosis

Lyme disease

***Neisseria meningitidis*, invasive (1 day)\***

**Pertussis (1 day)\***

**Plague (immediately)\***

Psittacosis

Relapsing fever (tick and louse-borne)

**Salmonellosis (including typhoid fever) (1 day)\***

**Shigellosis (1 day)\***

*Staphylococcus aureus*, methicillin-resistant (MRSA), invasive<sup>†</sup>\*

*Streptococcus pneumoniae* (pneumococcus), invasive, <18 yrs

*Streptococcus pyogenes* (group A streptococcus), invasive

Syphilis\*

Tetanus

Tuberculosis

**Tularemia (immediately)\***

Yersiniosis, all species

### **Rickettsia and Parasites**

Amebiasis

Cryptosporidiosis

Echinococcosis

Giardiasis

Malaria

**Q-fever (1 day)\***

Rocky Mountain spotted fever (RMSF)

Trichinosis

### **Other**

Blood Lead Level

•  $\geq 5$   $\mu\text{g/dL}$  whole blood in children (<18 yrs)

•  $\geq 10$   $\mu\text{g/dL}$  whole blood in adults

Cancer (Report to Cancer Data Registry, 338-5100)\*

**Extraordinary occurrence of illness including syndromic clusters with or without an etiologic agent (1 day)\***

**Foodborne illness/food poisoning (1 day)\***

**Hemolytic uremic syndrome (HUS) (1 day)**

**Newborn screening abnormal findings (1 day)\***

• Biotinidase deficiency

• Congenital hypothyroidism

• Maple syrup urine disease

• Galactosemia

• Phenylketonuria

*Pneumocystis pneumonia* (PCP)

Reye Syndrome

Rheumatic fever, acute

**Severe or unusual reactions to any immunization (1 day)\***

Toxic Shock Syndrome (TSS)

Transmissible spongiform encephalopathies (TSEs), including CJD and vCJD\*

**Waterborne illness (1 day)\***

\* Suspected cases also reportable

† Cases reportable by labs only

### **Viral Diseases**

Encephalitis, viral or aseptic\*

**Hantavirus pulmonary syndrome (1 day)\***

**Hepatitis A (1 day)\***

**Hepatitis B (1 day)\***

Hepatitis C

HIV/AIDS: positive HIV antibody, HIV antigen & other HIV isolations, CD4 count of  $<200$  cells/mm<sup>3</sup> blood or  $\leq 14\%$

Human T-lymphotrophic virus (HTLV-I or -II)

**Measles (rubeola) (1 day)\***

Meningitis, viral or aseptic

Mumps

Myocarditis, viral\*

**Norovirus (1 day)**

**Novel Influenza A virus (1 day)**

**Poliomyelitis, paralytic and non-paralytic (1 day)\***

**Rabies: animal (1 day)**

**Rabies: human (immediately)\***

**Rabies post-exposure prophylaxis (rPEP) (1 day)**

**Respiratory syncytial virus (RSV) (1 day)<sup>†</sup>**

**Rubella, including congenital rubella syndrome (1 day)\***

**SARS (1 day)\***

**Smallpox (immediately)\***

West Nile virus infections

### **REPORTING A CASE**

#### **What to Report:**

All reports are confidential and must include:

- Disease or condition reported
- Patient's name, age, date of birth, sex, address (including city and county), phone number, and date of specimen collection, if applicable
- Physician's name, address, and phone number

#### **When to Report**

##### **Immediate Reports / Emergency Notifications**

**During business hours:** Phone or fax all reports.

**After hours:** State Communications public health paging system (State Comm) at **(800) 632-8000**. A public health official will be notified.

##### **1 Day Reports (required within 1 working day)**

**During business hours:** Phone, fax, or via electronic reporting system.

**After hours:** If the reporting period falls on a weekend or holiday report to your public health district or State Epidemiology Program the next working day or you may call State Comm as above.

##### **Routine Reports (required within 3 working days)**

Phone, fax, mail, or via electronic reporting system all reports. A confidential State Epidemiology Program line is available:  
**(800) 632-5927**

--This is NOT an emergency hotline--



**Public Health**  
Idaho North Central District

To report cases  
Monday – Friday  
8:00 am – 5:00 pm  
Public Health - Idaho  
North Central District  
Epidemiology Staff  
208-799-3100  
208-799-0349 Fax

Idaho Department of Health and Welfare, Division of Public Health  
Bureau of Communicable Disease Prevention  
Epidemiology Program  
450 W. State St, 4<sup>th</sup> Floor, Boise, ID 83720  
Phone: 208-334-5939, Fax: 208-332-7307  
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