A case or suspected case of the following diseases is to be reported to the Department of Health by health-care providers, laboratories, schools, and child care facilities within the number of hours indicated following the disease name.

VACCINE-PREVENTABLE DISEASES

Report the following to the Division of Epidemiology- Disease Surveillance and Investigation

TEL (202) 442-9371 FAX (202) 442-8060 64 New York Avenue, NE, Suite 5000, Washington, DC 20002

- Chickenpox-48HR
- Diphtheria-2HR
- Measles-2HR
- Mumps-2HR
- Pertussis (Whooping Cough) 2HR
- Poliomyelitis-2HR
- Rubella (including congenital)-2HR
- Tetanus-48HR
- Vaccine Adverse Events-48HR

SCHOOL-RELATED COMMUNICABLE DISEASES/CONDITIONS

Report the following to the Division of Epidemiology- Disease Surveillance and Investigation

> TEL (202) 442-5859 FAX (202) 442-8060 64 New York Avenue, NE, Suite 5000, Washington, DC 20002

• Scabies- 48HR

- Tinea Capitis (Ringworm of scalp)- 48HR
- STREP NON-INVASIVE, GROUP A (including Scarlet Fever and Strep Throat)- 24HR

PLEASE NOTE:

An outbreak of a disease of known or unknown etiology that may be a danger to the public health is reportable immediately.

SEXUALLY-TRANSMITTED DISEASES (STD)

Report the following to the STD Division FAX (202) 727-4934 or 727-3345 TEL (202) 727-9860 717 14th Street, NW, Washington, DC

- Chancroid-24HR
- Chlamydia infections (including PID and perinatal)-24HR
- Gonococcal infections-24HR
- Granuloma inguinale-24HR

- Lymphogranuloma venereum-24HR
- Non-gonococcal urethritis-24HR
- Ophthalmia neonatorum-24HR
- Syphilis (including congenital)-24HR

HEPATITIS

Report Hepatitis * (48HR) to the Bureau of Communicable Disease Control TEL (202) 671-4900 FAX (202) 671-5094
64 New York Avenue, NE, Box 19, Washington, DC 20002
* Includes Hepatitis A, B, C, D, non A-nonB

TUBERCULOSIS

Report Tuberculosis (24HR) to the Bureau of Tuberculosis Control TEL (202) 698-4030 FAX (202) 724-2363

1900 Massachusetts Avenue, SE, Bldg. 15, Washington, DC 20003

ANIMAL BITES

Report Animal Bites (2HR) to the Animal Disease Control Division TEL (202) 576-6664 FAX (202) 635-7915 1201 New York Avenue, NE, Washington, DC 20002

LEAD POISONING

Report Lead Poisoning* to the Lead Poisoning Prevention Program TEL (202) 535-1934 FAX (202) 481-3770 51 N Street, NE, 6th Floor, Washington, DC 20002

* Defined as a blood lead level of > 10 micrograms per deciliter in a child less than 6 years of age

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OTHER IMPORTANT COMMUNICABLE DISEASES/CONDITIONS Report the following to the Division of Epidemiology- Disease Surveillance and Investigation

TEL (202) 442-9177 FAX (202) 442-8060 64 New York Avenue, NE, Suite 5000, Washington, DC 20002

- AMEBIASIS-48HR
- ANTHRAX-2HR
- BOTULISM-2HR
- BRUCELLOSIS-48HR
- CAMPYLOBACTERIOSIS-24HR
- CHOLERA-2HR
- COCCIDIOIDOMYCOSIS-48HR
- CRYPTOSPORIDIOSIS-48HR
- CYCLOSPORIASIS-48HR
- E.COLI 0157:H7 INFECTION-2HR
- ENCEPHALITIS-48HR
- FOOD/WATERBORNE ILLNESS-2HR
- GIARDIASIS-48HR
- HAEMOPHILUS INFLUENZAE, INVASIVE-24HR
- HANTAVIRUS PULMONARY SYNDROME-2HR
- HEMOLYTIC UREMIC SYND.,post-diarrheal-2HR
- INFLUENZA, CONFIRMED-48HR
- INFLUENZA A, NOVEL-48HR
- LEGIONELLOSIS-48HR
- LEPROSY-24HR
- LEPTOSPIROSIS-48HR
- LISTERIOSIS-48HR
- LYME DISEASE-48HR

- MALARIA-48HR
- MENINGITIS (other than meningococcal)- 24HR
- MENINGOCOCCAL DISEASE-2HR
- OUTBREAKS, ANY DISEASE-2HR
- PLAGUE-2HR
- PSITTACOSIS-24HR
- Q-FEVER-24HR
- RABIES, HUMAN OR ANIMAL-2HR
- ROCKY MOUNTAIN SPOTTED FEVER-48HR
- SALMONELLOSIS-24HR
- SEVERE ACUTE RESPIRATORY SYNDROME-2HR
- SHIGELLOSIS-24HR
- SMALLPOX-2HR
- STREP INVASIVE, GROUP A-2HR
- STREP PNEUMONIAE, INVASIVE-24HR
- TOXIC-SHOCK SYNDROME-48HR
- TRICHINOSIS-48HR
- TYPHOID FEVER-2HR
- TULAREMIA-24HR
- TYPHUS-48HR
- VIBRIO-ANY SPECIES-48HR
- YELLOW FEVER-2HR
- YERSINIOSIS-48HR

PLEASE NOTE:

- 1. A single case of a disease not included in the list above, of known or unknown etiology, that may be a danger to the public health, or is not normally endemic in the area, as well as unusual manifestations of a communicable disease, are reportable immediately by telephone.
- 2. An outbreak of a disease of known or unknown etiology that may be a danger to the public health is reportable immediately.
- 3. Cases of disease suspected or confirmed to be caused by high priority bioterrorism agents, such as *Bacillus anthracis*, *Yersinia pestis*, *Francisella tularensis*, *Brucella* species, *Coxiella burnetii*, Smallpox virus, and *Clostridium botulinum* toxin, are reportable immediately by telephone.

HUMAN IMMUNODEFICIENCY VIRUS (HIV) AND ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)

Report the following to the Administration for HIV Policy and Programs
Bureau of Surveillance and Epidemiology
TEL (202) 671-4900

64 New York Avenue, NE, Suite 5001, Washington, DC 20002

Laboratory and Blood Banks-48HR

- HIV positive test results
- All CD4 test results indicative of an HIV diagnosis

Healthcare Providers-48HR

- HIV infection
- Perinatal exposure
- HIV/AIDS- related death.
- AIDS diagnosis which includes:
 - o CD4 count less than 200 mm³ (or less than 14%, if the absolute count is not available)

All viral load test results

- o AIDS-defining condition, as follows:
 - Candidiasis of esophagus, bronchi, trachea, or lungs
 - Cervical cancer, invasive
 - Coccidioidomycosis, disseminated or extrapulmonary
 - Cryptococcosis, extrapulmonary
 - Cryptosporidiosis, chronic intestinal (greater than one month's duration)
 - Cytomegalovirus disease (other than liver, spleen, or nodes)
 - Cytomegalovirus retinitis (with loss of vision)
 - Encephalopathy, HIV-related
 - Herpes simplex: chronic ulcer(s) (greater than one month's duration); or bronchitis, pneumonitis, or esophagitis
 - Histoplasmosis, disseminated or extrapulmonary
 - Isoporiasis, chronic intestinal (greater than one month's duration)
 - Kaposi's sarcoma
 - Lymphoma, Burkitt's (or equivalent term)
 - Lymphoma, immunoblastic (or equivalent term)
 - Lymphoma, primary, of brain
 - Mycobacterium avium complex or M. kansasii, disseminated or extrapulmonary
 - Mycobacterium tuberculosis, any site (pulmonary or extrapulmonary)
 - Mycobacterium, other species or unidentified species, disseminated or extrapulmonary
 - Pneumocystis carinni pneumonia [Pneumocystis Jiroveci]
 - Pneumonia, recurrent
 - Progressive multifocal leukoencephalopathy
 - Salmonella septicemia, recurrent;
 - Toxoplasmosis of brain
 - Wasting syndrome due to HIV

GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH REQUIREMENTS FOR FORWARDING SPECIMENS/ISOLATES FROM HOSPITAL, COMMERCIAL, AND REFERENCE LABORATORIES TO THE BUREAU OF LABORATORIES

- 1. Send specimens and/or isolates from ALL cases (diagnosed or suspected) of:
 - Anthrax
 - Botulism
 - Hantavirus pulmonary syndrome
 - Hemolytic uremic syndrome (<u>E</u>. <u>coli</u> only)
 - Toxic shock syndrome
 - Streptococcal Group A invasive diseases
 - Streptococcal Group B neonatal diseases
 - Streptococcus pneumoniae infections, invasive
- 2. The following isolates need to be serotyped/serogrouped and/or speciated. If the laboratory lacks this capacity or the appropriate tests have not been ordered, send isolates of the following:
 - Salmonella
 - Shigella dysenteriae (or any Shigella sterile site isolate)
 - Campylobacter
 - Escherichia coli 0157:H7
 - Vibrio cholerae
 - Haemophilus influenzae sterile site isolates
 - Neisseria meningitidis sterile site isolates

SEND ISOLATES AND SPECIMENS TO:

BUREAU OF LABORATORIES
Microbiology Division
7 DC Village Lane, SW
Washington, DC 20032
TEL (202) 741-7700 FAX (202) 481-3429

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