

IDAHO REPORTABLE DISEASE LIST**

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

**Health care providers, laboratorians, hospital administrators, school administrators, and persons in charge of food establishments 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.

For a complete list, see *Idaho Reportable Diseases* (IDAPA 16.02.10): <https://adminrules.idaho.gov/rules/current/16/160210.pdf>

*Suspected cases are also reportable †Cases are reportable by labs only

➡ Forwarding of isolates, suspected select agents, or reactive (positive) clinical specimens to Idaho Bureau of Laboratories is strongly encouraged.

Amebiasis and free-living amebae

Anthrax (immediately)*

Arboviral disease*

Botulism: foodborne, infant, other (immediately)*

Brucellosis (1 day) ➡

Campylobacteriosis ➡

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

Chancroid

Chlamydia trachomatis

Cholera (1 day)* ➡

Cryptosporidiosis ➡

Diphtheria (immediately)*

Echinococcosis

Encephalitis, viral or aseptic

Escherichia coli O157:H7 and other shiga-toxin producing E. coli (STEC) (1 day)* ➡

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

Foodborne illness/food poisoning (1 day)*

Giardiasis

Haemophilus influenzae, invasive disease (1 day)* ➡

Hantavirus pulmonary syndrome (1 day)*

Hemolytic uremic syndrome (HUS) (1 day)

Hepatitis A (1 day)*

Hepatitis B (1 day)*

Hepatitis C

HIV/AIDS: positive HIV antibody, HIV antigen, HIV isolations, and other positive tests, CD4 lymphocyte count of <200 cells/mm³ blood or ≤ 14%

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

Lead level, elevated

- ≥ 5 µg/dL whole blood in children (<18 yrs)
- ≥ 10 µg/dL whole blood in adults (≥18 yrs)

Legionellosis / Legionnaire's disease ➡

Leprosy (Hansen's disease)

Leptospirosis

Listeriosis ➡

Lyme disease

Malaria

Measles (rubeola) (1 day)*

Meningitis, viral or aseptic

Methicillin-resistant *Staphylococcus aureus* (MRSA), invasive disease†*

Mumps

Myocarditis, viral

Neisseria gonorrhoeae (gonorrhea)

Neisseria meningitidis, invasive (1 day)* ➡

Newborn screening abnormal findings (1 day)*

- Biotinidase deficiency
- Congenital hypothyroidism
- Galactosemia
- Maple syrup urine disease
- Phenylketonuria

Norovirus (1 day) ➡

Novel Influenza A virus (1 day) ➡

Pertussis (1 day)* ➡ - Culture Only

Plague (immediately)* ➡

Pneumococcus (*Streptococcus pneumoniae*), invasive disease, <18 yrs ➡

Pneumocystis pneumonia (PCP)

Poliomyelitis, paralytic & non-paralytic (1 day)* ➡

Psittacosis

Q-fever (1 day)* ➡

Rabies: animal (1 day) ➡

Rabies: human (immediately)* ➡

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

Relapsing fever (tick and louse-borne)

Respiratory syncytial virus (RSV) (1 day)†

Reye Syndrome

Rocky Mountain spotted fever (RMSF)

Rubella, including congenital rubella syndrome (1 day)*

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

Severe Acute Respiratory Syndrome (SARS)

(1 day)* ➡

Severe or unusual reactions to any immunization

(1 day)*

Shigellosis (1 day)* ➡

Smallpox (immediately)* ➡

Streptococcus pyogenes (group A streptococcus), infections, invasive, rheumatic fever, and necrotizing fasciitis ➡

Syphilis*

Tetanus

Toxic Shock Syndrome (TSS)

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

Trichinosis

Tuberculosis ➡

Tularemia (immediately)* ➡

Waterborne illness (1 day)*

Yersiniosis, non-*pestis*

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 --



IDAHO DEPARTMENT OF HEALTH & WELFARE

DIVISION OF PUBLIC HEALTH

Bureau of Communicable Disease Prevention
Epidemiology Program
450 W. State St, 4th Floor, Boise, ID 83720
Phone: 208-334-5939, Fax: 208-332-7307

Idaho Bureau of Laboratories
2220 Old Penitentiary Rd., Boise, ID 83712
Phone: 208-334-2235, Fax: 208-334-4067

Sampling and Submission Guide:

<http://healthandwelfare.idaho.gov/Health/Labs/SamplingandSubmissionGuide/tabid/2223/Default.aspx>

IDAHO REPORTABLE DISEASE LIST FOR LABORATORIES*

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

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BACTERIA

Bacillus anthracis* (immediately)
***Bordetella pertussis* (1 day)* ➡ - Culture Only**
Borrelia spp.
***Brucella* spp. (1 day) ➡**
Campylobacter spp.
Chlamydia psittaci
Chlamydia trachomatis
Clostridium botulinum* (immediately)
Clostridium tetani
Corynebacterium diphtheriae* (immediately)
***Coxiella burnetii* (1 day)* ➡**
***Escherichia coli* O157:H7 and other shiga-toxin producing *E. coli* (STEC) (1 day)* ➡**
***Francisella tularensis* (immediately)* ➡**
Haemophilus ducreyi (Chancroid)
***Haemophilus influenzae*, from sterile site (1 day)* ➡**
Legionella ➡
Leptospira
Listeria monocytogenes ➡
Mycobacterium leprae
Mycobacterium tuberculosis complex ➡
Neisseria gonorrhoeae
***Neisseria meningitidis*, from sterile site (1 day)* ➡**
***Salmonella* spp.* ➡**
***Shigella* spp.* ➡**
Staphylococcus aureus, methicillin-resistant (MRSA), from sterile site*
Streptococcus pneumoniae (pneumococcus), from sterile site, <18 years of age
Streptococcus pyogenes, from sterile site ➡
*Treponema pallidum**
***Vibrio cholerae* (1 day)* ➡**
***Yersinia pestis* (immediately)* ➡**
Yersinia, non-*pestis*

VIRUSES

Any viral infection resulting in Encephalitis*, Meningitis, or Myocarditis*
Arboviruses*
Hantavirus (1 day)*
Hepatitis A (1 day)*
Hepatitis B (1 day)*
Hepatitis C
Positive HIV antibody, HIV antigen & other positive tests, HIV isolations
Human T-lymphotropic virus (HTLV-I or -II)
Measles (1 day)*
Mumps
Norovirus (1 day) ➡
Novel Influenza A virus (1 day) ➡
Polio (1 day)*
Rabies: animal (1 day) ➡
Rabies: human (immediately)* ➡
Respiratory syncytial virus (1 day) †
Rubella (1 day)*
SARS-coronavirus (1 day)* ➡
Variola major (immediately)* ➡

PRIONS

Any result indicative of human prion disease*

RICKETTSIA AND PARASITES

Acanthamoeba spp., *Balamuthia mandrillaris*, *Naegleria fowleri*, *Entamoeba histolytica*
Cryptosporidia spp. ➡
Echinococcus spp.
Giardia spp.
Plasmodium spp.
Rickettsii spp.
Trichinella spp.

OTHER IMPORTANT LABORATORY RESULTS

Any unusual, rare, or novel etiologic isolations and identifications (1 day)*

CD4 lymphocyte count of <200 cells/mm³ blood or ≤ 14%

Blood Lead Level

• ≥ 5 µg/dL whole blood in children (<18 yrs)

• ≥ 10 µg/dL whole blood in adults (≥18 yrs)

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

Pneumocystis jiroveci

REPORTING A CASE

What to Report:

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- Etiologic agent(s)
- 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

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