

Reporting of evidence of the following conditions by laboratory directors is required by state law in Virginia (Section 32.1-36 of the *Code of Virginia*, and 12 VAC 5-90-80 and 12 VAC 5-90-90 of the Board of Health *Regulations for Disease Reporting and Control* - <http://www.vdh.virginia.gov/surveillance-and-investigation/division-of-surveillance-and-investigation/commonwealth-of-virginiastate-board-of-health/>). Report to your local health department (LHD).

**RED** indicates conditions which must be reported immediately by the most rapid means available, preferably by telephone. All other conditions must be reported within 3 days.  
 indicates laboratories must submit initial isolate or other initial specimen to the Division of Consolidated Laboratories Services within 7 days of identification. All specimens must include patient and physician identities and LHD must also be notified.

Condition	Method of Detection
Amebiasis	Microscopic examination, culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
<b>Anthrax</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
Arboviral infection (e.g., CHIK, dengue, EEE, LAC, SLE, WNV, Zika)	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
Babesiosis	Culture, antigen detection, nucleic acid detection, microscopic examination, or serologic results consistent with recent infection
<b>Botulism</b>	Culture, nucleic acid detection, or identification of neurotoxin in a clinical specimen
<b>Brucellosis</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
Campylobacteriosis	Culture or culture-independent diagnostic test (CIDT) (i.e., antigen detection, or nucleic acid detection). For CIDT, also submit all available culture results (positive or negative) associated with a positive result.
Chancroid	Culture, antigen detection, or nucleic acid detection
Chickenpox (Varicella)	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
<i>Chlamydia trachomatis</i> infection	Culture, antigen detection, nucleic acid detection or, for lymphogranuloma venereum, serologic results consistent with recent infection
<b>Cholera</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
<b>Coronavirus infection, severe (e.g., SARS-CoV, MERS-CoV)</b>	Culture, nucleic acid detection, or serologic results consistent with recent infection
Creutzfeldt-Jakob disease if <55 years of age	Histopathology in patient <55 years of age
Cryptosporidiosis	Microscopic examination, antigen detection, or nucleic acid detection
Cyclosporiasis	Microscopic examination or nucleic acid detection
<b>Diphtheria</b>	Culture or histopathology
Ehrlichiosis/Anaplasmosis	Culture, nucleic acid detection, microscopic examination, or serologic results consistent with recent infection
<i>Escherichia coli</i> infection, Shiga toxin-producing	Culture, Shiga toxin detection (e.g., nucleic acid detection, EIA), or serologic results consistent with recent infection. <i>Laboratories that use a Shiga toxin EIA methodology but do not perform simultaneous culture for Shiga toxin-producing E. coli should forward all positive stool specimens or positive enrichment broths to DCLS for confirmation and further characterization.</i>
Giardiasis	Microscopic examination, antigen detection, or nucleic acid detection
Gonorrhea	Microscopic examination of a urethral smear (males only) or endocervical smear (females only), culture, antigen detection, or nucleic acid detection. Include available antimicrobial susceptibility findings in report.
<b>Haemophilus influenzae infection, invasive</b>	Culture, antigen detection, or nucleic acid detection from a normally sterile site
Hantavirus pulmonary syndrome	Antigen detection (immunohistochemistry), nucleic acid detection, or serologic results consistent with recent infection
<b>Hepatitis A</b>	Detection of IgM antibodies
Hepatitis B (acute and chronic)	Detection of HBsAg, HBeAg, IgM antibodies, or nucleic acid detection. For any reportable hepatitis finding, submit all available results from the hepatitis panel.
Hepatitis C (acute and chronic)	Hepatitis C virus antibody (anti-HCV) positive, HCV antigen positive, or HCV RNA positive by nucleic acid test. For all hepatitis C patients, also report available results of serum alanine aminotransferase (ALT) and all available results from the hepatitis panel.
Hepatitis, other acute viral	Any finding indicative of acute infection with hepatitis D, E, or other cause of viral hepatitis. For any reportable hepatitis finding, submit all available results from the hepatitis panel.
Human immunodeficiency virus (HIV) infection	Culture, antigen detection, nucleic acid detection, or detection of antibody. For HIV-infected patients, report all results of CD4 and HIV viral load tests including undetectable viral loads. For HIV-infected patients, report all HIV genetic nucleotide sequence data associated with HIV drug resistance tests by electronic submission. For children <3 years of age, report all tests regardless of the test findings (e.g., negative or positive).
Influenza (including <b>influenza A, novel virus</b> )	Culture, antigen detection by direct fluorescent antibody (DFA), or nucleic acid detection

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Lead, reportable levels	Any detectable blood lead level in children ages 0-15 years or levels $\geq 5$ $\mu\text{g/dL}$ in persons older than 15 years of age
Legionellosis	Culture, antigen detection (including urinary antigen), nucleic acid detection, or serologic results consistent with recent infection
Leptospirosis	Culture, microscopic examination by dark field microscopy, nucleic acid detection, or serologic results consistent with recent infection
Listeriosis	Culture from a normally sterile site. If associated with miscarriage or stillbirth, by culture from placental or fetal tissue.
Lyme disease	Culture, antigen detection, or detection of antibody confirmed with a supplemental test
Malaria	Microscopic examination, antigen detection, or nucleic acid detection
<b>Measles (Rubeola)</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
<b>Meningococcal disease</b>	Culture, nucleic acid detection, or antigen detection from a normally sterile site
Mumps	Culture, nucleic acid detection, or serologic results consistent with recent infection
<b>Mycobacterial diseases</b>	1. Acid fast bacilli by microscopic examination; 2. Mycobacterial identification - preliminary and final by culture* or nucleic acid detection; 3. Drug susceptibility test results for <i>M. tuberculosis</i> <i>* A laboratory identifying Mycobacterium tuberculosis complex (See 12 VAC 5-90-225) shall submit a representative and viable sample of the initial culture to DCLS or other laboratory designated by the Board of Health to receive such a specimen.</i>
<b>Pertussis</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
<b>Plague</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
<b>Poliovirus infection</b>	Culture
<b>Psittacosis</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
<b>Q fever</b>	Culture, antigen detection, nucleic acid detection, immunohistochemical methods, or serologic results consistent with recent infection
<b>Rabies (human and animal)</b>	Culture, antigen detection by direct fluorescent antibody test, nucleic acid detection, or, for humans only, serologic results consistent with recent infection
<b>Rubella</b>	Culture, nucleic acid detection, or serologic results consistent with recent infection
Salmonellosis	Culture, antigen detection, or nucleic acid detection
Shigellosis	Culture, antigen detection, or nucleic acid detection
<b>Smallpox (Variola)</b>	Culture or nucleic acid detection
Spotted fever rickettsiosis	Culture, antigen detection (including immunohistochemical staining), nucleic acid detection, or serologic results consistent with recent infection
<i>Staphylococcus aureus</i> infection, vancomycin-intermediate or vancomycin-resistant	Antimicrobial susceptibility testing of a <i>Staphylococcus aureus</i> isolate, with a vancomycin susceptibility result of intermediate or resistant cultured from a clinical specimen. Include available antimicrobial susceptibility findings in report.
Streptococcal disease, Group A, invasive or toxic shock	For invasive disease, culture from a normally sterile site; for streptococcal toxic shock, by culture from any body site
<i>Streptococcus pneumoniae</i> infection, invasive, in children <5 years of age	Culture from a normally sterile site in a child <5 years of age
Syphilis (including <b>primary</b> and <b>secondary</b> )	Darkfield microscopy, antigen detection, nucleic acid detection, or serology by either treponemal or nontreponemal methods
Toxic substance-related illness	Blood or urine laboratory findings above the normal range, including but not limited to heavy metals, pesticides, and industrial-type solvents and gases. When applicable and available, report speciation of metals when blood or urine levels are elevated in order to differentiate the chemical species (elemental, organic, or inorganic).
Trichinosis (Trichinellosis)	Microscopic examination of a muscle biopsy or serologic results consistent with recent infection
<b>Tuberculosis (TB)</b>	(See Mycobacterial diseases)
<b>Tularemia</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
<b>Typhoid/Paratyphoid fever</b>	Culture, antigen detection, or nucleic acid detection
<b>Vaccinia, disease or adverse event</b>	Culture or nucleic acid detection
<b>Vibrio infection</b>	Isolation of any species of the family Vibrionaceae (other than toxigenic <i>Vibrio cholera</i> O1 or O139, which are reportable as cholera) from a clinical specimen by culture, antigen detection, or nucleic acid detection.
<b>Viral hemorrhagic fever</b>	Culture, antigen detection (including immunohistochemical staining), nucleic acid detection, or serologic results consistent with recent infection
<b>Yellow fever</b>	Culture, antigen detection, nucleic acid detection, or serologic results consistent with recent infection
Yersiniosis	Culture, nucleic acid detection, or serologic results consistent with recent infection