VIRGINIA REPORTABLE DISEASE LIST

Reporting of the following diseases is required by state law (Sections 32.1-36 and 32.1-37 of the Code of Virginia and 12 VAC 5-90-80 of the Board of Health Regulations for Disease Reporting and Control). Report all conditions when suspected or confirmed to your local health department (LHD). Reports may be submitted by Confidential Morbidity Report Portal (Epi-1 form), computergenerated printout, CDC or VDH surveillance form, or upon agreement with VDH, by means of secure electronic submission.

REPORT IMMEDIATELY

- Anthrax (Bacillus anthracis) (4) (6)
- Botulism (Clostridium botulinum) (4) (6)
- Brucellosis (Brucella spp.) 🐴 🍘
- Cholera (Vibrio cholerae 01/0139) 🕙 🍘
- Coronavirus infection, severe (e.g., SARS-CoV, MERS-CoV) (8) (a)
- Diphtheria (Corynebacterium diphtheriae) 🕙 🍘
- Disease caused by an agent that may have been used as a weapon
- Haemophilus influenzae infection, invasive 🕙 🃦
- Hepatitis A 🕙
- Influenza-associated deaths if younger than 18 years of age
- Influenza A, novel virus 🕙 📦
- Measles (Rubeola) 🐴
- Meningococcal disease (Neisseria meningitidis) 🐴 🃦
- Orthopoxviruses (e.g., Monkeypox virus, Variola virus/Smallpox, Vaccinia disease or adverse event)
- Outbreaks, all (including foodborne, healthcare-associated, occupational, toxic substance-related, waterborne, and any other outbreak)
- Pertussis/Whooping cough (Bordetella pertussis) 🕙 🃦
- Plague (Yersinia pestis) 🕙 🍘
- Poliovirus infection, including poliomyelitis 🕙 🃦
- Psittacosis (Chlamydophila psittaci)
- Q fever (Coxiella burnetti) 🐴 📦
- Rabies, human and animal (8)
- Rubella, including congenital rubella syndrome 🕙
- Syphilis (Treponema pallidum), congenital, primary, and secondary
- Tuberculosis, active disease (Mycobacterium tuberculosis complex) 🕙 🃦 🏶
- Tularemia (Francisella tularensis) 🕙 📦
- Typhoid/Paratyphoid infection (Salmonella Typhi, Salmonella Paratyphi (all types)) 🐴 📦
- Unusual occurrence of disease of public health concern
- Vibriosis (Vibrio spp.) 🐴 🃦 b
- Viral hemorrhagic fever
- Yellow fever

LEGEND

- Reportable by directors of laboratories. Additional condition-specific requirements for directors of laboratories available here. These and all other conditions listed must be reported by physicians and directors of medical care
- Laboratories must submit the initial isolate (preferred) within five days or the clinical specimen within two days of a positive result. All specimens must be identified with patient and physician information, and the LHD must be notified within the specified reporting timeframe.
- Include available antimicrobial susceptibility findings in report.
- a Laboratories report acid-fast bacilli, M. tuberculosis complex or any other mycobacteria, and antimicrobial susceptibility for M. tuberculosis complex.
- **b** Includes reporting of *Photobacterium damselae* and *Grimontia hollisae*.
- c Includes submission of Candida haemulonii specimens to DCLS.
- **d** By culture, antigen detection by direct fluorescent antibody (DFA), or nucleic acid detection. Influenza rapid antigen tests are not reportable.
- e Laboratories that use enzyme immunoassay (EIA) without a positive culture should forward positive stool specimens or enrichment broth to DCLS.

REPORT WITHIN 3 DAYS

- Alpha-gal Syndrome (AGS) 🐴
- Amebiasis (Entamoeba histolytica)
- Arboviral infections (e.g., CHIK, dengue, EEE, LAC, SLE, WNV, Zika)
- Babesiosis (Babesia spp.)
- Campylobacteriosis (Campylobacter spp.)
- Candida auris, infection or colonization (4) (a) (%) c
- Carbapenemase-producing organism, infection or colonization 🕙 🍙 🏶
- Chancroid (Haemophilus ducreyi)
- Chickenpox (Varicella virus)
- Chlamydia trachomatis infection
- Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)
- Cryptosporidiosis (Cryptosporidium spp.)
- Cyclosporiasis (Cyclospora spp.)
- Ehrlichiosis/Anaplasmosis (Ehrlichia spp., Anaplasma phagocytophilum) 🕙
- Giardiasis (Giardia spp.) 🕙
- Gonorrhea (Neisseria gonorrhoeae) 🕙 🏶
- Granuloma inguinale (Calymmatobacterium granulomatis)
- Hantavirus pulmonary syndrome 🕙
- Hemolytic uremic syndrome (HUS)
- Hepatitis B (acute and chronic)
- Hepatitis C (acute and chronic)
- Hepatitis, other acute viral
- Human immunodeficiency virus (HIV) infection
- Influenza, laboratory-confirmed 🕙 d
- Lead, reportable blood levels <a>
- Legionellosis (Legionella spp.)
- Leprosy/Hansen's disease (Mycobacterium leprae)
- Leptospirosis (Leptospira interrogans)
- Listeriosis (Listeria monocytogenes) (4) (6)
- Lyme disease (Borrelia spp.)
- Lymphogranuloma venereum (Chlamydia trachomatis)
- Malaria (Plasmodium spp.)
- Mumps
- Neonatal abstinence syndrome (NAS)
- Ophthalmia neonatorum
- Rabies treatment, post-exposure
- Salmonellosis (Salmonella spp.) 🕙 🏐
- Shiga toxin-producing Escherichia coli infection 🕙 🍘 e
- Shigellosis (Shigella spp.) 🕙 📦
- Spotted fever rickettsiosis (Rickettsia spp.)
- Streptococcal disease, Group A, invasive or toxic shock 🕙 🃦
- Streptococcus pneumoniae infection, invasive if <5 years of age
- Syphilis (Treponema pallidum), if not primary, secondary, or congenital (8)
- Tetanus (Clostridium tetani)
- Toxic substance-related illness <a>
- Trichinosis (Trichinellosis) (Trichinella spiralis)
- Tuberculosis infection (8)
- Vancomycin-intermediate or vancomycin-resistant Staphylococcus aureus infection 🕙 🍘 🏶
- Yersiniosis (Yersinia spp.) (4) (6)



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- 1. the disease or condition diagnosed or suspected
- 2. patient's name, date of birth, age, sex, race/ethnicity, pregnancy status, address, and telephone number
- 3. physician's name, address, and telephone number
- 4. method of diagnosis, if available

