

# 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 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 all conditions when suspected or confirmed to your local health department (LHD). Reports may be by computer-generated printout, Epi-1 form, CDC or VDH surveillance form, or upon agreement with VDH, by means of secure electronic transmission.

**BOLD** – Laboratories must submit initial isolate or other initial specimen to the Division of Consolidated Laboratory Services (DCLS) within 7 days of identification. All specimens must be identified with patient and physician information, and the LHD must be notified within the timeframe specified below.

## REPORT IMMEDIATELY

**Anthrax** [a]  
**Botulism** [a]  
**Brucellosis** [a]  
**Cholera** [a]  
 Coronavirus infection, severe (e.g., SARS-CoV, MERS-CoV) [a]  
**Diphtheria** [a]  
 Disease caused by an agent that may have been used as a weapon  
**Haemophilus influenzae infection, invasive** [a]  
 Hepatitis A [a]  
 Influenza-associated deaths <18 years of age  
**Influenza A, novel virus** [a]  
 Measles (Rubeola) [a]  
**Meningococcal disease** [a]  
 Outbreaks, all (including but not limited to foodborne, healthcare-associated, occupational, toxic substance-related, and waterborne)  
**Pertussis** [a]  
**Plague** [a]  
**Poliovirus infection, including poliomyelitis** [a]  
**Psittacosis** [a]  
**Q fever** [a]  
 Rabies, human and animal [a]  
 Rubella [a], including congenital rubella syndrome [a]  
 Smallpox (Variola) [a]  
 Syphilis, primary and secondary [a]  
**Tuberculosis (TB), active disease** [a,b]  
**Tularemia** [a]  
**Typhoid/Paratyphoid fever** [a]  
 Unusual occurrence of disease of public health concern  
 Vaccinia, disease or adverse event [a]  
**Vibrio infection** [a]  
 Viral hemorrhagic fever [a]  
 Yellow fever [a]

## REPORT WITHIN 3 DAYS

Acquired immunodeficiency syndrome (AIDS)  
 Amebiasis [a]  
 Arboviral infections (e.g., CHIK, dengue, EEE, LAC, SLE, WNV, Zika) [a]  
 Babesiosis [a]  
 Campylobacteriosis [a]  
 Chancroid [a]  
 Chickenpox (Varicella) [a]  
*Chlamydia trachomatis* infection [a]  
 Creutzfeldt-Jakob disease <55 years of age [a]  
 Cryptosporidiosis [a]  
 Cyclosporiasis [a]  
 Ehrlichiosis/Anaplasmosis [a]  
**Escherichia coli infection, Shiga toxin-producing** [a,c]  
 Giardiasis [a]  
 Gonorrhea [a]  
 Granuloma inguinale  
 Hantavirus pulmonary syndrome [a]  
 Hemolytic uremic syndrome (HUS)  
 Hepatitis B (acute and chronic) [a]  
 Hepatitis C (acute and chronic) [a]  
 Hepatitis, other acute viral [a]  
 Human immunodeficiency virus (HIV) infection [a]  
 Influenza [a,d]  
 Lead, reportable levels [a]  
 Legionellosis [a]  
 Leprosy (Hansen's disease)  
 Leptospirosis [a]  
**Listeriosis** [a]  
 Lyme disease [a]  
 Lymphogranuloma venereum  
 Malaria [a]  
 Mumps [a]  
 Ophthalmia neonatorum  
 Rabies treatment, post-exposure  
**Salmonellosis** [a]  
**Shigellosis** [a]  
 Spotted fever rickettsiosis [a]  
**Staphylococcus aureus infection, vancomycin-intermediate or vancomycin-resistant** [a]  
**Streptococcal disease, Group A, invasive or toxic shock** [a]  
*Streptococcus pneumoniae* infection, invasive, <5 years of age [a]  
 Syphilis, other than primary and secondary  
 Tetanus  
 Toxic substance-related illness [a]  
 Trichinosis (Trichinellosis) [a]  
 Tuberculosis (TB) infection <4 years of age  
**Yersiniosis** [a]

## LEGEND

[a] Reportable by directors of laboratories. These and all other conditions listed must be reported by physicians and directors of medical care facilities.

[b] Laboratories report AFB, mycobacterial identification, and drug susceptibility for *M. tuberculosis*

[c] Laboratories that use EIA without a positive culture should forward positive stool specimens or enrichment broth to DCLS

[d] Physicians and directors of medical care facilities report influenza by number of cases only (report total number per week and by type of influenza, if known); however, individual cases of influenza A novel virus or influenza-related deaths in persons <18 must be reported immediately