

UTAH REPORTABLE DISEASES

Utah law requires that the following diseases be reported to your local health department or the Utah Department of Health.

REPORT WITHIN 24 HOURS OF A SUSPECT DIAGNOSIS

- Anthrax (*Bacillus anthracis*) or anthrax-like illness caused by *Bacillus cereus* strains that express anthrax toxin genes²
- Botulism (*Clostridium botulinum*)²
- Cholera (*Vibrio cholerae*)
- Diphtheria (*Corynebacterium diphtheriae*)²
- *Haemophilus influenzae*, invasive disease²
- Hepatitis A
- Influenza infection, non-seasonal strain²
- Measles (Rubeola virus)²
- Middle East Respiratory Syndrome
- Meningococcal disease (*Neisseria meningitidis*)²
- Plague (*Yersinia pestis*)²
- Poliomyelitis, paralytic and non-paralytic
- Rabies (human and animal)
- Rubella (excluding congenital syndrome)
- Severe acute respiratory syndrome (SARS)
- Smallpox (Variola virus)
- *Staphylococcus aureus*, with resistance (VRSA)^{1, 2} to vancomycin
- Transmissible spongiform encephalopathies (prion diseases), including Creutzfeldt-Jakob disease
- Tuberculosis (*Mycobacterium tuberculosis* complex)^{1, 2}
- Tularemia (*Francisella tularensis*)²
- Typhoid, cases and carriers²
- Viral hemorrhagic fevers, including *Ebola*, *Lassa*, *Marburg*, and *Nipah* virus-related illnesses

Also Immediately Reportable: Unusual diseases or outbreaks of any kind and any exposure/infection that may indicate a bioterrorism event

REPORT WITHIN 3 WORKING DAYS OF IDENTIFICATION

- Acute flaccid myelitis (AFM)
- Adverse event resulting from smallpox vaccination (Vaccinia virus)
- Anaplasmosis (*Anaplasma phagocytophilum*)
- Arbovirus infection, including Chikungunya, West Nile², and Zika virus²
- Babesiosis (*Babesia*)
- Botulism, infant (*Clostridium botulinum*)²
- Brucellosis (*Brucella* species)
- Campylobacteriosis (*Campylobacter*)²
- *Candida auris* or *haemulonii* from any body site^{1, 2}
- Carbapenem-resistant or carbapenemase producing *Acinetobacter* species, *Enterobacter* species, *Escherichia coli*, and *Klebsiella* species^{1, 2}
- Chagas disease
- Chancroid (*Haemophilus ducreyi*)
- Chickenpox (Varicella-zoster virus)
- *Chlamydia trachomatis* infection
- Coccidioidomycosis (*Coccidioides*)
- Colorado tick fever
- Cryptosporidiosis (*Cryptosporidium*)
- *Cyclosporiasis* (*Cyclospora cayatanensis*)
- Dengue fever
- Ehrlichiosis (*Ehrlichia*)
- Encephalitis or meningitis (bacterial, fungal, parasitic, protozoan and viral)
- Shiga toxin-producing *Escherichia coli* (STEC) infection²
- Giardiasis (*Giardia lamblia*)
- Gonorrhea (*Neisseria gonorrhoeae*) sexually transmitted and ophthalmia neonatorum¹
- Hantavirus infection (Sin Nombre virus)
- Hemolytic uremic syndrome, post-diarrheal
- Hepatitis, viral, including hepatitis B (acute, chronic and perinatal), C (acute, chronic and perinatal), D, and E
- Human immunodeficiency virus (HIV) infection, including perinatal and acquired immunodeficiency syndrome (AIDS) diagnosis
- Influenza-associated hospitalization²
- Influenza-associated death in a person less than 18 years of age
- Legionellosis (*Legionella*)²
- Leprosy (Hansen's Disease)
- Leptospirosis (*Leptospira*)
- Listeriosis (*Listeria monocytogenes*)²
- Lyme disease (*Borrelia burgdorferi*)
- Malaria (*Plasmodium*)
- Mumps
- Mycobacteria other than tuberculosis
- Pertussis (*Bordetella pertussis*)
- Psittacosis (*Chlamydia psittaci*)
- Q Fever (*Coxiella burnetii*)
- Relapsing fever, tick-borne and louse-borne (*Borrelia*)
- Rubella, including congenital syndrome
- Salmonellosis (*Salmonella*)^{1, 2}
- Shigellosis (*Shigella*)^{1, 2}
- Spotted fever rickettsioses, including Rocky Mountain spotted fever (*Rickettsia*)
- Streptococcal disease, invasive, due to *Streptococcus pneumoniae*¹ and Groups A and B
- Syphilis, all stages, congenital, and syphilitic stillbirths
- Tetanus (*Clostridium tetani*)
- Toxic shock syndrome, staphylococcal or streptococcal
- Trichinellosis (*Trichinella*)
- Vibriosis (*Vibrio*)², including Cholera

Also Reportable: Pregnancies associated with Hepatitis B, Hepatitis C, HIV, *Listeria*, Rubella, Syphilis, or Zika virus infection even if the disease was reported to public health prior to the pregnancy

¹ Full panel susceptibility results, including minimum inhibitory concentration and results suppressed to the ordering clinician, are reportable when performed on the following organisms

² Laboratories shall submit clinical material to the Utah Public Health Laboratory for all cases identified with these organisms, or any organism implicated in an outbreak when instructed by authorized local or state health department staff.

Electronic Laboratory Reporting (ELR)

Entities reporting via ELR have additional reporting requirements not listed on this document. Those requirements can be found under the "Information for Reporters" tab at <http://health.utah.gov/epi/reporting> or by contacting the Utah Department of Health at elr@utah.gov.

Diseases may be reported to your [local health department](#) or the Utah Department of Health (UDOH) by fax ([801-538-9923](tel:801-538-9923)), email (reporting@utah.gov) or telephone (1-888-EPI-UTAH). Email reports should be sent encrypted, through a secure email system. Reports sent without encryption risk breach of confidentiality. The UDOH cannot guarantee the security of information submitted without encryption. For questions about disease reporting, email the Utah Department of Health at reporting@utah.gov, call [801-538-6191](tel:801-538-6191) or visit <http://health.utah.gov/epi/reporting>.