

Waukesha County Public Health

## DISEASES REPORTABLE AT THE STATE AND NATIONAL LEVEL

## **CATEGORY I:**

The following diseases are of urgent public health importance and shall be reported by telephone to the patient's local health officer or to the local health officer's designee upon identification of a case or suspected case, pursuant to s. DHS 145.04 (3) (a). In addition to the immediate report, complete and fax, mail or electronically report an Acute and Communicable Diseases Case Report (DHS F-44151) to the address on the form, or enter the data into the Wisconsin Electronic Disease Surveillance System, within 24 hours. Public health intervention is expected as indicated. See s. DHS 145.04 (3) (a).

Anthrax 1,4,5	Ricin toxin 4,5	
Botulism (Clostridium botulinum) (including foodborne, infant,	Rubella 1,2,4,5	
wound, and other) 1,2,4,5	Rubella (congenital syndrome) 1,2,5	
Carbapenem-resistant Enterobacteriaceae (CRE) 2	Severe Acute Respiratory Syndrome-associated Corona-	
Cholera (Vibrio cholera) 1,3,4	virus (SARS-CoV) 1,2,3,4	
<b>COVID-19</b> 1, 2, 6, 7	Smallpox 4,5	
Diphtheria (Corynebacterium diphtheria) 1,3,4,5	Tuberculosis 1,2,3,4,5	
<i>Haemophilus influenzae</i> invasive disease, (including epiglot- titis) 1,2,3,5	Vancomycin-intermediate <i>Staphylococcus aureus</i> (VISA) and Vancomycin-resistant <i>Staphylococcus aureus</i> (VRSA) infection 1,4,5 Viral Hemorrhagic Fever (VHF) (including Crimean-Congo, Ebola, Lassa, Lujo, and Marburg viruses, and New World Arena-	
Hantavirus infection 1,2,4		
Hepatitis A 1,2,3,4,5		
Measles (rubeola) 1,2,3,4,5	viruses) 1,2,3,4	
Meningococcal disease (Neisseria meningitidis) 1,2,3,4,5	Yellow fever 1,4	
Middle Eastern Respiratory Syndrome-associated Corona- virus (MERS-CoV) 2,3,4	Outbreaks, confirmed or suspected:	
	Foodborne or waterborne 1, 3,4,6	
<b>Pertussis</b> (whooping cough, caused by any <i>Bordetella</i> infection) 1,2,3,4,5	Occupationally-related diseases 6 Other acute illnesses 3,4,6 Any detection of or illness caused by an agent that is for- eign, exotic or unusual to Wisconsin, and that has public	
Plague (Yersinia pestis) 1,4,5		
Poliovirus infection (paralytic or nonparalytic) 1,4,5		
<b>Primary Amebic Meningoencephalitis</b> (PAM) ( <i>Naegleria fowleri</i> ) 2,4,5,6	health implications4	
Rabies (human, animal) 1,4,5		

## CATEGORY II:

The following diseases shall be reported by fax, mail, or electronic reporting to the patient's local health officer or to the local health officer's designee on an Acute and Communicable Disease Case Report (DHS F-44151) or by other means or by entering the data into the Wisconsin Electronic Disease Surveillance System within 72 hours of the identification of a case or suspected case. See s. DHS 145.04 (3) (b).

Anaplasmosis 1,2,5	Gonorrhea (Neisseria gonorrhoeae)	Shigellosis (Shigella infection) 1,2,3,4
<b>Arboviral disease</b> (including, but not limited to, disease caused by California serogroup, Chikungunya, Dengue, East- ern Equine Encephalitis, Powassan, St. Louis Encephalitis, West Nile, Western Equine Encephalitis, and Zika viruses) 1,2,4	1,2,4,5	Spotted Fever Rickettsiosis (including
	Hemolytic uremic syndrome 1,2,3,4	Rocky Mountain spotted fever) 1,2,4,5 <b>Streptococcal disease</b> (all invasive disease caused by Groups A and B Streptococci)
	Hepatitis B 1,2,3,4,5	
	Hepatitis C 1,2	
	Hepatitis D 2,3,4,	Streptococcus pneumoniae invasive
Babesiosis 1,2,4,5	Hepatitis E	disease (invasive pneumococcal) 1
Blastomycosis 2	Histoplasmosis 2	<b>Syphilis</b> (Treponema pallidum) 1,2,4,5,6
<b>Borreliosis</b> (other than Lyme disease which is reportable as a distinct disease) 2,4,6	Influenza-associated hospitalization 2	<b>Tetanus</b> 1,2,5
	Influenza-associated pediatric death 1,2,4	Toxic shock syndrome 1,2
Brucellosis 1,2,4		Toxic substance related diseases:
	Influenza A virus infection, novel sub- types 1,2	
<b>Campylobacteriosis</b> (Campylobacter infection) 1,2,3,4	Kawasaki disease 2	Blue-green algae (Cyanobacteria) and Cyanotoxin poisoning 2,4,6
Chancroid (Haemophilus ducreyi) 1,2	Latent Tuberculosis infection (LTBI)	Carbon monoxide poisoning 1,6
Chlamydia trachomatis infection	2,5	Infant methemoglobinemia 6
1,2,4,5	Legionellosis 1,2,4,5	Lead (Pb) intoxication (specify Pb lev-
Coccidioidomycosis (Valley Fever) 1,2,4	<b>Leprosy</b> (Hansen's Disease) 1,2,3,4,5	els) 1,6
<b>Cryptosporidiosis</b> (Cryptosporidium	Leptospirosis 1,2,4	Metal poisonings other than lead (Pb)
infection)1,2,3,4	Listeriosis 1,2,4	
	Lyme disease 1,2	Pesticide poisonings 1,6
1,2	Lymphocytic Choriomeningitis Virus	Toxoplasmosis
Ehrlichiosis1,2,5	(LCMV) infection 4	Transmissible spongiform encephalo- pathy (TSE, human)
Environmental and occupational lung	Malaria (Plasmodium infection) 1,2,4,5	Trichinosis 1,2,4
diseases:	<b>Meningitis, bacterial</b> (other than Hae- mophilus influenzae, meningococcal or	<b>Tularemia</b> (Francisella tularensis)
Asbestosis 6	streptococcal, which are reportable as	1,2,4,5
Silicosis 1,6	distinct diseases) 2	Typhoid fever (Salmonella Typhi)
Chemical pneumonitis6	<b>Mumps</b> 1,2,4,5	1,2,3,4
Occupational lung diseases caused by bio-dusts and bio-aerosols6Mycobacterial disease (nontuberculous)E. coli infection, (caused by Shiga toxin-producing E. coli (STEC)) 1,2,3,4Pelvic inflammatory disease 2Beittacosis 1.2.4	-	Varicella (chickenpox) 1,3,5
	, , , , , , , , , , , , , , , , , , ,	<b>Vibriosis</b> (non-cholera Vibrio infection) 1,2,3,4
	Psittacosis 1,2,4	Yersiniosis 2,3,4
<b>E. coli infection</b> (caused by entero- pathogenic (EPEC), enteroinvasive (EIEC), or enterotoxigenic E. coli (ETEC)) 2,3,4	<b>Q Fever</b> (Coxiella burnetii) 1,2	Zika virus infection 1,2
	Rheumatic fever (newly diagnosed	
	and meeting the Jones criteria) 5	
Free living employ infortion		

**Rickettsiosis** (other than spotted fever rickettsiosis which is reportable as a distinct disease) 2,4,6

Salmonellosis 1,2,3,4

drillaris disease)2,4 **Giardiasis** 1,2,3,4

Free-living amebae infection

(including Acanthamoeba disease

(including keratitis) and Balamuthia man-

## CATEGORY III:

The following disease shall be reported to the state epidemiologist on a Wisconsin Human Immunodeficiency Virus (HIV) Infection Case Report Form (DHS F-44338) or by other means within 72 hours after identification of a known or suspected case. Additionally, the following laboratory results shall be reported on all persons newly or previously diagnosed with HIV infection each time the test is conducted: all CD4+ test results (CD4+ T-lymphocyte counts and percentages), both detectable and undetectable HIV viral load results, HIV genotypic results, and all components of the HIV laboratory diagnostic testing algorithm when the initial screening test is reactive. See s. 252.15 (7) (b), Stats., and s. DHS 145.04 (3) (b).

Human immunodeficiency virus (HIV) infection (AIDS has been reclassified as HIV Stage III)1,2,4

Key:

1 Infectious disease or other condition designated as notifiable at the national level.

2 Required Wisconsin or CDC follow-up form completed by public health agency.

3 High-risk assessment by local health department is needed to determine if patient or member of patient's household is employed in food handling, day care or health care.

4 Source investigation by local or state health department is needed.

5 Immediate treatment is recommended, i.e., antibiotic or biologic for the patient or contact or both.

6 Coordination between local and state health departments is recommended for follow-up.

SECTION 10. EFFECTIVE DATE: This rule shall take effect on the first day of the month following publication in the Wisconsin administrative register, as provided in s. 227.22 (2), Stats.