Know Your ABCs: a Quick Guide to Reportable Infectious Diseases in Ohio

from the Ohio Administrative Code 3701-3-02 & 3701-3-13

Class A Diseases

(1) diseases of major public health concern because of the severity of disease or potential for epidemic spread report by telephone immediately upon recognition that a case, a suspected case, or a positive laboratory result exists

Measles Rubella (not congenital) Anthrax Tularemia

Botulism, foodborne Severe Acute Respiratory Viral Hemorrhagic Fever (VHF) Meningococcal disease

Cholera Plague Syndrome (SARS) Yellow Fever

Diphtheria Rabies, human **Smallpox**

Any unexpected pattern of cases, suspected cases, deaths or increased incidence of any other disease of major public health concern, because of the severity of disease or potential for epidemic spread, which may indicate a newly recognized infectious agent, outbreak, epidemic, related public health hazard or act of bioterrorism.

(2) diseases of pubic health concern needing timely response because of potential for epidemic spread report by the end of the next business day after the existence of a case, a suspected case, or a positive laboratory result is known

Arboviral neuroinvasive and non-neuroinvasive disease

Eastern equine encephalitis virus

disease

LaCrosse virus disease

(other California

serogroup virus disease) Powassan virus disease St. Louis encephalitis

virus disease

West Nile virus disease (also current infection)

Western equine encephalitis virus

disease

Other arthropod-borne disease

Chancroid Cyclosporiasis Coccidioidomycosis

Dengue

E. coli O157:H7 and other enterohemorrhagic (Shiga toxin-producina) E. coli

Foodborne disease outbreaks

Granuloma inguinale Haemophilus influenzae

(invasive disease) Hantavirus Hemolytic uremic syndrome (HUS)

Hepatitis A

Hepatitis B, perinatal

Influenza-associated pediatric mortality Legionnaires' disease

Listeriosis

Malaria

Mumps

Lymphogranuloma venereum

Meningitis, aseptic, including viral meningoencephalitis

Pertussis Poliomyelitis (including vaccineassociated cases)

Psittacosis Q fever

Rubella (congenital) Salmonellosis Shigellosis

Staphylococcus aureus, with resistance or

intermediate resistance to

Vancomvcin (VRSA, VISA) **Syphilis** Tetanus

Tuberculosis, including multi-drug resistant tuberculosis (MDR-TB)

Typhoid fever Waterborne disease

outbreaks

(3) diseases of significant public health concern -- report by the end of the work week after the existence of a case, a suspected case, or a positive laboratory result is known

Amebiasis Botulism, wound Botulism, infant Brucellosis

Campylobacteriosis Chlamydia infections (urethritis, epididymitis, cervicitis, pelvic inflammatory disease, neonatal conjunctivitis and

pneumonia) Creutzfeldt-Jakob disease (CJD) Cryptosporidiosis

Cytomegalovirus (CMV) (congenital)

Ehrlichiosis

Encephalitis, other viral Encephalitis, postinfection Giardiasis

Gonococcal infections (urethritis, cervicitis, pelvic inflammatory disease, pharyngitis, arthritis, endocarditis, meningitis and neonatal

conjunctivitis) Hepatitis B, non perinatal

Hepatitis C

Hepatitis D (delta hepatitis)

Hepatitis E

Herpes (congenital)

Kawasaki disease (mucocutaneous lymph

node syndrome) Leprosy (Hansen disease)

Leptospirosis Lyme disease

Meningitis, including other

bacterial

Mycobacterial disease, other than tuberculosis

(MOTT) Reye syndrome Rheumatic fever Rocky Mountain spotted

fever (RMSF) Streptococcal disease,

group A, invasive (IGAS)

Streptococcal disease, group B, in newborn Streptococcal toxic shock syndrome (STSS) Streptococcus pneumo-

niae, invasive disease (ISP)

Toxic shock syndrome

(TSS) Toxoplasmosis (congenital) Trichinosis Typhus fever Varicella

Vibriosis Yersiniosis

Class B Disease - the number of cases is to be reported by the close of each working week

Class C Diseases - report an outbreak, unusual incidence, or epidemic by the end of the next working day

Blastomycosis Scabies Conjunctivitis, acute Sporotrichosis Histoplasmosis Staphylococcal skin Nosocomial infections of infections **Toxoplasmosis** any type

Outbreak, unusual incidence, or epidemic of other infectious diseases of known etiology not categorized as Class A, Class B or Class C

Pediculosis Except as otherwise required for the Class A(1) diseases, reports of cases and suspect cases and positive laboratory results shall be in writing, and shall include the name and address of the case, suspect case, or person from whom the specimen was taken. A Board of Health may accept verbal reports by telephone or other electronic systems approved by the Director within the same time limitations. Reports shall include supplementary information relevant to the case or laboratory reports as needed to complete official surveillance forms provided or approved by the Director.

Cases of AIDS (acquired immune deficiency syndrome), AIDS-related conditions, HIV (human immunodeficiency virus) infection, perinatal exposure to HIV, and CD4 T-lymphocytes counts <200 or 14% must be reported on forms and in a manner prescribed by the Director.