

# UTAH REPORTABLE DISEASES

Utah law requires that these diseases be reported to your local health department or the Utah Department of Health immediately (within 24 hours after identification).

- Anthrax\* (*Bacillus anthracis*)
- Botulism\* (*Clostridium botulinum*)
- Cholera (*Vibrio cholerae*)
- Creutzfeldt-Jakob disease and other transmissible human spongiform encephalopathies
- Diphtheria\* (*Corynebacterium diphtheria*)
- *Haemophilus influenzae*, \*invasive disease
- Hepatitis A
- Measles\* (Rubeola virus)
- Meningococcal disease\* (*Neisseria meningitidis*)
- Plague\* (*Yersinia pestis*)
- Poliomyelitis, paralytic and non-paralytic
- Rabies (human and animal)
- Rubella (including congenital syndrome)
- Severe Acute Respiratory Syndrome (SARS)
- Smallpox (Variola virus)
- Staphylococcus aureus, from any clinical specimen with resistance (VRSA) or intermediate resistance (VISA) to vancomycin isolated from any site\*
- Tuberculosis\* (*Mycobacterium tuberculosis*)
- Tularemia\* (*Francisella tularensis*)
- Typhoid, cases and carriers
- Viral hemorrhagic fevers, e.g., *Ebola*, *Lassa*, *Marburg*, and *Nipah* virus-related illnesses
- Yellow fever

## ALSO IMMEDIATELY REPORTABLE: UNUSUAL DISEASES OR OUTBREAKS OF ANY KIND

Utah law requires that these diseases be reported to your local health department or the Utah Department of Health within three (3) days after identification.

- *Acinetobacter* species, from any clinical specimen that is resistant to at least one carbapenem-class antibiotic, or that has demonstrated carbapenemase production
- Acquired immunodeficiency syndrome (AIDS)
- Acute Flaccid Myelitis (AFM)
- Adverse event resulting from smallpox vaccination (*Vaccinia* virus)
- *Anaplasma phagocytophilum* infection
- Arbovirus infection,\* including Chikungunya, Saint Louis encephalitis and West Nile virus
- Babesiosis (*Babesia*)
- Botulism, infant
- Brucellosis\* (*Brucella* species)
- Campylobacteriosis\* (*Campylobacter*)
- Chancroid (*Haemophilus ducreyi*)
- Chickenpox (Varicella-zoster virus)
- *Chlamydia trachomatis* infection
- Coccidioidomycosis (*Coccidioides*)
- Colorado tick fever
- Cryptosporidiosis (*Cryptosporidium*)
- *Cyclospora* infection
- Dengue fever
- *Ehrlichia chaffeensis* infection
- *Ehrlichia ewingii* infection
- Encephalitis
- *Escherichia coli*, from any clinical specimen, that is resistant to at least one carbapenem-class antibiotic, or that has demonstrated carbapenemase production
- Shiga toxin-producing *Escherichia coli* (STEC) infection\*
- *Enterobacter* species, from any clinical specimen, that is resistant to at least one carbapenem-class antibiotic, or that has demonstrated carbapenemase production
- Giardiasis (*Giardia*)
- Gonorrhoea,\* (*Neisseria gonorrhoeae*) sexually transmitted and ophthalmia neonatorum
- Hansen's disease (Leprosy)
- Hantavirus pulmonary syndrome (Sin Nombre virus)
- Hemolytic uremic syndrome, post-diarrheal
- Hepatitis B, acute, chronic and perinatal
- Hepatitis C
- Hepatitis, other viral
- Human immunodeficiency virus (HIV) infection
- Influenza-associated hospitalization\*
- Influenza-associated death in a person less than 18 years of age
- *Klebsiella* species, from any clinical specimen, that is resistant to at least one carbapenem-class antibiotic, or that has demonstrated carbapenemase production
- Legionellosis\* (*Legionella*)
- Leptospirosis (*Leptospira*)
- Listeriosis\* (*Listeria monocytogens*)
- Lyme disease (*Borrelia burgdorferi*)
- Malaria (*Plasmodium*)
- Meningitis (aseptic, bacterial, fungal, parasitic, protozoan and viral)
- Mumps
- Mycobacteria other than tuberculosis\*
- Norovirus, outbreaks only
- Pertussis (*Bordetella pertussis*)
- Psittacosis (*Chlamydophila psittaci*)
- Q Fever (*Coxiella burnetii*)
- Relapsing fever, tick-borne and louse-borne (*Borrelia*)
- Salmonellosis\* (*Salmonella*)
- Shigellosis\* (*Shigella*)
- Spotted fever rickettsioses, including Rocky Mountain spotted fever (*Rickettsia*)
- disease, invasive, due to *Streptococcus pneumoniae* and Groups A and B isolated from a normally sterile site
- Syphilis, all stages and congenital
- Tetanus (*Clostridium tetani*)
- Toxic shock syndrome, staphylococcal or streptococcal
- Trichinellosis (*Trichinella*)
- Vibriosis\* (*Vibrio*)

## Reportable diseases through Electronic Laboratory Reporting (ELR) for participating laboratories and hospitals

- *Clostridium difficile*
- Cytomegalovirus (CMV), congenital
- Streptococcal disease, invasive, other

\*Laboratories shall submit isolates of causative agents, or if an isolate is not available, clinical material, to the Utah Public Health Laboratory for these diseases/conditions, including any organism implicated in an outbreak when instructed by authorized local or state health department staff. 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 ([epi@utah.gov](mailto:epi@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 Bureau of Epidemiology at [epi@utah.gov](mailto:epi@utah.gov), call [801-538-6191](tel:801-538-6191) or visit <http://health.utah.gov/epi>.