To help prevent and control the spread of communicable diseases in the District of Columbia, healthcare providers, veterinarians, or other persons in charge of a communicable disease case are required by law to report certain diseases and conditions to the DC Department of Health (DC Health) according to Chapter 22-B2 of the District of Columbia Municipal Regulations. A case or suspected case of the following diseases must immediately be reported the indicated to DC Health within timeframe. Please view our website for additional information: https://dchealth.dc.gov/service/infectious-diseases.

**Emerging infectious diseases, an unusual occurrence of any disease, or an infection or outbreak (e.g. healthcare-associated, foodborne) that may be of public health concern must also be reported immediately** by telephone to (202) 442-8141 during normal business hours (weekdays, 8:15am–4:45pm) and then by an online report as described in the section "Other Diseases and Conditions." For immediate epidemiological support to address an urgent/emergent public health issue outside of business hours (weekdays, 8:15am–4:45pm), please call 1-(844)-493-2652.

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	Vaccine-Preventable	
What to Report	<ul> <li>Chickenpox (morbidity, pediatric mortality) – 48 h</li> <li>Diphtheria – Immediate*</li> <li><i>Haemophilus influenza</i>, invasive – 24 h</li> <li>Hepatitis A – Immediate*</li> <li>Measles (Rubeola) – Immediate*</li> <li>Meningitis (<i>Neisseria meningitidis</i>) – Immediate*</li> </ul>	<ul> <li>Pertussis (Whooping cough) – Immediate*</li> <li>Poliovirus infection – Immediate*</li> <li>Rubella, including congenital rubella syndrome – Immediate*</li> <li>Streptococcal infection, invasive (Pneumococcal disease) – 24 h</li> <li>Tetanus – 24 h</li> </ul>
	<ul> <li>Mumps – Immediate*</li> </ul>	• Vaccine adverse events – 48 h
Important Notes	* Must be reported immediately by telephone at (202) 442-9371 upon provisional diagnosis or the appearance of suspicious symptoms, and confirmed through an online report submitted using <b>DCRC</b> within 24 h.	
How to Report	DC Reporting and Surveillance Center ( <b>DCRC</b> ) online reporting system	
	Notifiable Disease and Condition Case Report Form	
	http://dchealth.dc.gov/service/infectious-diseases	
Cantaat		
Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI)	
Information	899 North Capitol Street NE, 6 <sup>th</sup> Floor, Washington, DC 20002	
	Tel (202) 442-9371 • Fax (202) 4	442-8060 • <u>vaccine.epi@dc.gov</u>

	Human Immunodeficiency Virus (HIV)	
What to Report	• HIV infection – 48 h	
	<ul> <li>Pregnancies in HIV–infected women – 48 h</li> </ul>	
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system	
	Notifiable Disease and Condition Case Report Form	
	https://redcap.doh.dc.gov/surveys/?s=AAMF93CEY7	
Contact	HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA)	
Information	899 North Capitol Street NE, 4th Floor, Washington, DC 20002	
	Tel (202) 671-4900 • Fax (202) 673-4367	

	Tuberculosis	
What to Report	• Tuberculosis – 48 h	
How to Report	Fax	
	Form available	
	at https://dchealth.dc.gov/sites/default/files/dc/sites/doh/publication/attachments/TB	
	Case Report Form.pdf	
Contact	HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA)	
Information	899 North Capitol Street NE, 4th Floor, Washington, DC 20002	
	Tel (202) 698-4030 • Fax (202) 724-2363	

	Hepatitis B and C*	
What to Report	• Hepatitis $B - 48 h^{\neq}$	
	• Pregnancy in a woman positive for hepatitis B – 48 h <sup>#</sup>	
	• Hepatitis C – 48 h	
	• Pregnancy in a woman positive for hepatitis C – 48 h <sup>#</sup>	
Important Notes	*Hepatitis A is listed under Vaccine–Preventable diseases	
	<sup>#</sup> Acute hepatitis B is currently mandated. However, case reports for chronic and perinatal	
	hepatitis B are <b>requested</b> and will be mandated in forthcoming regulations.	
	<b>*Requested</b> , but not currently mandated. These conditions will be mandated in forthcoming	
	regulations.	
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system	
	Notifiable Disease and Condition Case Report Form	
	https://redcap.doh.dc.gov/surveys/?s=AAMF93CEY7	
Contact	HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA)	
Information	899 North Capitol Street NE, 4th Floor, Washington, DC 20002	
	Tel (202) 671-4900 • Fax (202) 671-5094	

	Sexually Transmitted Diseases		
What to Report	<ul> <li>Chancroid – 48 h</li> <li>Chlamydia trachomatis infection (including PID*, perinatal, and trachoma) – 48 h</li> <li>Gonococcal infection – 48 h</li> <li>Granuloma inguinale (donovanosis) – 48 h</li> </ul>	<ul> <li>Lymphogranuloma venereum (LGV, including atypical LGV) – 24 h</li> <li>Syphilis (all stages and congenital) – 48 h</li> <li>Urethritis, atypical – 48 h<sup>#</sup></li> </ul>	
Important Notes	*PID: Pelvic inflammatory disease		
	<sup>#</sup> Urethritis, atypical, is clinical urethritis with negative nucleic acid amplification test for		
	Chlamydia trachomatis and Neisseria gonorrhoeae. Possible etiologies include M. genitalium,		
	T. vaginalis and Ureaplasma spp.		
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system		
	Notifiable Disease and Condition Case Report Form		
	https://redcap.doh.dc.gov/surveys/?s=AAMF93CEY7		
Contact	HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA)		
Information	899 North Capitol Street NE, 4th Floor, Washington, DC 20002		
	Tel (202) 671-4900 • Fax (202) 727-4934		

	Animal Bites	
What to Report	• A <i>person</i> bitten by an animal – Immediate	
Important Notes	Human rabies should be reported as described under Other Diseases and Conditions	
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system	
	Animal Bite Form	
	https://dchealth.dc.gov/service/rabies-and-animal-exposures	
Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI)	
Information	899 North Capitol Street, NE, 6th Floor, Washington, DC 20002	
	Tel (202) 442-9143 • Fax (202) 442-8060 • Email: rabies.info@dc.gov	
What to Report	• An <i>animal</i> who bites a person or animal – Immediate	
	• An <i>animal</i> bitten by another animal – Immediate	
	• An <i>animal</i> suspected to have rabies – Immediate*	
Important Notes	* Must be reported immediately by telephone (202) 442-4932 upon provisional diagnosis or the	
	appearance of suspicious symptoms. A report should be submitted online using DCRC within	
	24 h.	
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system	
	Animal Bite Form	
	https://dchealth.dc.gov/service/rabies-and-animal-exposures	
Contact	Animal Services Program and Animal Control	
Information	899 North Capitol Street, NE, Second Floor Washington, DC 20002	
	Tel (202) 567-6664 • Fax (202) 442-8117 • Email: <u>rabies.info@dc.gov</u>	

	Zika Virus Disease*	
What to Report	• Zika virus disease (including congenital Zika virus infection) – 24 h	
Important Notes	* For more information about pregnant women and infants being followed as part of the Zika	
	Pregnancy Registry, contact the Zika Pregnancy Registry Coordinator: Zika.registry@dc.gov	
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system	
	Zika Test Request and Reporting Form	
	https://dchealth.dc.gov/page/providers-information-zika-virus-testing-district-	
	columbia	
Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI)	
Information	899 North Capitol Street, NE, 6th Floor, Washington, DC 20002	
	Tel (202) 442-9370 • Fax (202) 442-8060 • Email: <u>Zika.registry@dc.gov</u>	

	Healthcare–Assoc	iated Infections (HAI)
What to Report	<ul> <li>Central line–associated bloodstream infections (CLABSIs)<sup>#</sup></li> <li>Catheter–associated urinary tract infections (CAUTIs)<sup>#</sup></li> <li>Surgical site infections (SSI): <ul> <li>SSI: Abdominal hysterectomy<sup>#</sup></li> <li>SSI: Colon surgery<sup>#</sup></li> </ul> </li> </ul>	<ul> <li>Methicillin-resistant Staphylococcus aureus (MRSA) bloodstream infections, LabID event<sup>#</sup></li> <li><i>Clostridium difficile (C.difficile)</i>, LabID event<sup>#</sup></li> <li>Carbapenem-resistant Enterobacteriaceae (CRE), LabID event<sup>#</sup></li> <li>Any infection considered of public health concern<sup>#</sup></li> <li>HAI outbreaks or clusters<sup>*</sup></li> </ul>
Important Notes	* Must be reported immediately by telephone (202) 442–5842 upon provisional diagnosis or the appearance of suspicious symptoms, and confirmed through an online report submitted using DCRC within 24 h	
How to Report	*Outbreaks and clusters should be reported using the DC Reporting and Surveillance Center (DCRC) online reporting system Notifiable Disease and Condition Case Report Form http://dchealth.dc.gov/service/infectious-diseases	
Contact Information	Division of Epidemiology– Disease Surveillance and Investigation (DE–DSI) 899 North Capitol Street NE, 6 <sup>th</sup> Floor, Washington, DC 20002 Tel (202) 442-8141 • Fax (202) 442-8060 • Email <u>doh.hai@dc.gov</u>	

	School/Child Care Facility-Associated Outbreaks*	
What to Report	Conjunctivitis (Pink Eye)	• Pinworm (Enterobiasis)
	Gastrointestinal illness	• Ringworm (Tinea)
	• Hand, foot, and mouth disease	Scabies
	Head lice	• Streptococcal non-invasive, Group A
	• Impetigo	(Scarlet fever and strep throat)
Important Notes	*Required to be reported within 24 h by school/child care facilities only when there are $\geq 3$	
	cases that occur in the facility within a 7-day period	
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system	
	Notifiable Disease and Condition Case Report Form	
	https://dchealth.dc.gov/node/115022	
Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI)	
Information	899 North Capitol Street, NE, 6th Floor, Washington, DC 20002	
	Tel (202) 442-5893 • Fax (202)	142-8060 • Email: <u>schoolhealth.epi@dc.gov</u>

	Blood Lead Levels (in children <6 years old)*	
What to Report	• Providers must report a lead poisoned child to DOEE by telephone within 72 h	
	of receiving notification from a laboratory or another provider/facility.	
	• Laboratories, including providers who utilize point-of-care (POC) testing, are	
	required by law to report all test results below $10 \mu g/dL$ within one week of analysis.	
	• For test results of $10 \mu g/dL$ and higher, laboratories and providers who utilize	
	point-of-care testing are required by law to report the result to DOEE	
	immediately. As a professional courtesy, we request that all results $\geq 5 \ \mu g/dL$ be	
	reported immediately as well.	
Important Notes	*Reported to DC Department of Energy & Environment (DOEE), not DC Health	
How to Report	Phone or Fax	
	Providers utilizing POC testing to report non-elevated results may also report by email	
Contact	DC Department of Energy & Environment (DOEE)	
Information	Lead and Healthy Housing Division	
	1200 First Street NE, 5th Floor, Washington, DC 20002	
	Tel (202) 654-6002 • Fax (202) 535-2607 • Email: <u>lead.screen@dc.gov</u>	

	Other Diseases and Conditions		
What to Report	Emerging infectious diseases – Immediate <sup>3</sup>		
what to Keport	<ul> <li>An unusual occurrence of any disease – Immediate*</li> </ul>		
	<ul> <li>An infection or outbreak that may be of public health concern – Immediate*</li> </ul>		
	An Infection of outbreak that may be of pt     Anthrax – Immediate*		
		<ul> <li>Meningococcal disease, invasive – Immediate*</li> </ul>	
	• Babesiosis – 48 h		
	• Botulism – Immediate*	• Middle East Respiratory Syndrome (MERS) –	
	• Brucellosis – 24 h	Immediate*	
	<ul> <li>Campylobacteriosis – 24 h</li> </ul>	• Plague ( <i>Yersinia pestis</i> ) – Immediate*	
	<ul> <li>Chikungunya – 24 h</li> </ul>	• Powassan virus – 48 h	
	• Cholera (Toxigenic Vibrio cholerae 01 or	• Psittacosis – 24 h	
	0139) – Immediate*	• Q Fever – 24 h	
	<ul> <li>Coccidioidomycosis – 48 h</li> </ul>	<ul> <li>Rabies (human) – Immediate*</li> </ul>	
	<ul> <li>Cryptosporidiosis – 48 h</li> </ul>	• Rickettsiosis, spotted fever (e.g. Rocky	
	<ul> <li>Cyclosporiasis – 48 h</li> </ul>	Mountain Spotted Fever) – 48 h	
	• Dengue – 24 h	<ul> <li>Salmonellosis – 48 h</li> </ul>	
	• Ehrlichiosis – 48 h	• Severe Acute Respiratory Syndrome (SARS)	
	• Encephalitis, acute arboviral (e.g. Eastern	– Immediate*	
	Equine Encephalitis, St. Louis Encephalitis,	Shiga toxin–producing Escherichia coli	
	Western Equine Encephalitis) – Immediate*	(STEC, including E. Coli O157:H7) –	
	• Giardiasis – 48 h	Immediate	
	• Hantavirus pulmonary syndrome (HPS) –	• Shigellosis – 48 h	
	Immediate*	• Smallpox – Immediate*	
	• Hemolytic uremic syndrome – Immediate*	• Staphylococcal infections in newborns	
	Hepatitis A – Immediate*	(nosocomial) – Immediate	
	<ul> <li>Influenza A novel subtype – Immediate*</li> </ul>	• Toxic shock syndrome (Staphylococcal,	
	<ul> <li>Influenza–associated mortality (patients less</li> </ul>	Streptococcal, and other) $-48$ h	
	• •	<ul> <li>Trichinosis (Trichinellosis) – 48 h</li> </ul>	
	than 18 years of age) – Immediate*	<ul> <li>Tularemia – Immediate*</li> </ul>	
	• Kawasaki disease – 48 h	<ul> <li>Typhoid fever (<i>Salmonella</i> typhi) –</li> </ul>	
	• Legionellosis – 48 h	Immediate*	
	• Leptospirosis – 48 h	<ul> <li>Vibriosis (non–cholera Vibrio species</li> </ul>	
	• Listeriosis – Immediate*	infections) – Immediate	
	• Lyme Disease – 48 h	<ul> <li>Viral hemorrhagic fevers (Ebola or other) –</li> </ul>	
	• Malaria – 48 h	<ul> <li>Vital hemorrhagic revers (Ebola of other) – Immediate*</li> </ul>	
	• Meliodosis – 48 h	<ul> <li>West Nile virus – 48 h</li> </ul>	
	• Meningitis, (aseptic or viral, fungal, and	<ul> <li>Yellow fever – Immediate*</li> </ul>	
	bacterial (other than <i>N. meningitidis</i> ) – 24 h		
		<ul> <li>Zika virus disease (including congenital Zika virus infection) – 24 h</li> </ul>	
Important Notes	*Must be reported immediately by telephone at (20	2) 442-8141 upon provisional diagnosis or the	
	appearance of suspicious symptoms, and confirmed	through an online report submitted using DCRC	
	within 24 h.		
How to Report	DC Reporting and Surveillance Cen	ter ( <b>DCRC</b> ) online reporting system	
		ndition Case Report Form	
	http://dchealth.dc.gov/service/infectious-diseases		
Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI)		
Information	899 North Capitol Street, NE, 6 <sup>th</sup> Floor, Washington, DC 20002		
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	Tel (202) 442-9371• Fax (202) 442-8060 • Email: <u>doh.epi@dc.gov</u>		