

# NOTIFIABLE CONDITIONS for Health Care Providers

Call KPHD 24/7  
360-728-2235



## Report **Immediately** any Suspected or Confirmed Case of:

Animal Bites (when human exposure to rabies is suspected)	<i>Haemophilus influenzae</i> (invasive disease, children < 5)	Rubella (including congenital rubella Syndrome), acute
Anthrax	Influenza, novel or unsubtypeable strain	SARS (Severe Acute Respiratory Syndrome)
Botulism (foodborne, wound, and infant)	Measles (rubeola), acute	Shiga toxin-producing <i>E. coli</i> infections (STEC, including but not limited to <i>E. coli</i> O157:H7; also includes post-diarrheal hemolytic uremic syndrome)
<i>Burkholderia mallei</i> (Glanders) and <i>pseudomallei</i> (Meliodiosis)	Meningococcal disease (invasive)	Smallpox
Cholera	Monkeypox	Tuberculosis
Diphtheria	Outbreaks of suspected foodborne origin	Tularemia
Disease of suspected bioterrorism origin	Outbreaks of suspected waterborne origin	Vaccinia transmission
Domoic acid poisoning (amnesic shellfish poisoning)	Paralytic shellfish poisoning	Viral hemorrhagic fever
<i>E. coli</i> —refer to “Shiga toxin producing <i>E. coli</i> infection”	Pesticide poisoning—hospitalized, fatal, or cluster 1-800-222-1222	Yellow Fever
Emerging condition with outbreak potential	Plague	
	Poliomyelitis	
	Rabies, confirmed human or animal	
	Rabies, suspected human exposure	

## Report Within **24 Hours** any Case of:

Brucellosis	Salmonellosis	Other diseases of public health significance, including but not limited to: Amoebic meningitis Anaplasmosis Babesiosis Carbapenemase-producing carbapenem-resistant Enterobacteriaceae (CP-CRE) Chagas disease Coccidioidomycosis <i>Cryptococcus gattii</i> Ehrlichiosis Histoplasmosis Shellfish poisoning (diarrhetic) Tickborne rickettsioses (including Rocky Mountain spotted fever) Tick paralysis Typhus
Hantavirus pulmonary syndrome	Shigellosis	
Hepatitis A—acute	Vancomycin-resistant <i>Staphylococcus aureus</i> (not to include vancomycin intermediate)	
Hepatitis B, acute	Vibriosis	
Hepatitis E, acute	Yersiniosis	
Legionellosis	Unexplained critical illness or death	
Leptospirosis		
Listeriosis		
Mumps, acute		
Pertussis		
Psittacosis		
Q Fever		
Relapsing fever (borreliosis)		

## Report Within **3 business days** any Case of:

Acquired immunodeficiency syndrome (AIDS), including in persons previously reported with HIV infection	Giardiasis	Lyme disease
Arboviral Disease (Acute disease only, including West Nile virus, dengue, eastern & Western equine encephalitis, Zika etc.)	Gonorrhea	Lymphogranuloma venereum
Campylobacteriosis	Granuloma inguinale	Malaria
Chancroid	Hepatitis B, surface antigen positive pregnant women	Pesticide poisoning—non-hospitalized, non-fatal, non-cluster: 1-800-222-1222
<i>Chlamydia trachomatis</i> infection	Hepatitis C, acute	Prion disease (including Creutzfeldt-Jakob disease (CJD))
Cryptosporidiosis	Hepatitis D, acute and chronic	Syphilis (including congenital)
Cyclosporiasis	Herpes simplex, neonatal and genital (initial infection only)	Tetanus
	HIV infection	Trichinosis
	Immunization reactions (severe, adverse)	Varicella-associated death
	Influenza-associated death, laboratory confirmed	

## Report on a monthly basis Case of:

Asthma, occupational (suspected or confirmed): 1-888-66-SHARP	Birth defects: 360-236-3533 (autism spectrum disorders, cerebral palsy, alcohol-related birth defects)	Hepatitis B—chronic (initial diagnosis only/previously unreported cases)
		Hepatitis C—chronic

## Washington Administrative Code (WAC) 246-101

The conditions listed on the front page are notifiable to public health authorities in accordance with WAC 246-101

- Report to the local health jurisdiction of the patient's residence within the timeframe indicated (except for conditions followed by a reporting phone number).
- Other rare diseases of public health significance means a disease or condition of general or international public health concern, which is occasionally or not ordinarily seen in the state of Washington including, but not limited to, spotted fever rickettsiosis, babesiosis, tick paralysis, anaplasmosis, and other tick borne diseases. This also includes public health events of international concern and communicable disease that would be of general public concern if detected in Washington.

**WAC 246-101-101 Notifiable conditions and the health care provider.** This section describes the conditions that Washington's health care providers must notify public health authorities of on a statewide basis. The board finds that the conditions in the table below (Table HC-1) are notifiable for the prevention and control of communicable and noninfectious diseases and conditions in Washington. Principal health care providers shall notify public health authorities of these conditions as individual case reports using procedures described throughout this chapter. Other health care providers in attendance shall notify public health authorities of the following notifiable conditions, unless the condition notification has already been made. Local health officers may require additional conditions to be notifiable within the local health officer's jurisdiction.

**WAC 246-101-005 Purpose of notifiable conditions reporting.** The purpose of notifiable conditions reporting is to provide the information necessary for public health officials to protect the public's health by tracking communicable diseases and other conditions. These data are critical to local health departments and the departments of health and labor and industries in their efforts to prevent and control the spread of diseases and other conditions. Public health officials take steps to protect the public, based on these notifications. Treating persons already ill, providing preventive therapies for individuals who came into contact with infectious agents, investigating and halting outbreaks, and removing harmful health exposures are key ways public health officials protect the public. Public health workers also use these data to assess broader patterns, including historical trends and geographic clustering. By analyzing the broader picture, officials are able to take appropriate actions, including outbreak investigation, redirection of program activities, or policy development.