

**Notifiable Conditions Reporting from Local Health Jurisdictions to the Washington State Department of Health**



The following conditions are notifiable to the Washington State Department of Health in accordance with timeframes specified in Washington Administrative Code 246-101. See the footnote below for the appropriate Department of Health agency to which cases should be reported.

**Immediately Reportable: (suspect or confirmed cases)**

**Botulism (foodborne, wound, infant) <sup>1</sup>**  
**Cholera <sup>1</sup>**  
**Diphtheria <sup>1</sup>**  
**Disease of suspected bioterrorism origin <sup>1</sup> (including but not limited to anthrax)**

**Emerging condition with outbreak potential <sup>1</sup>**  
**Influenza, novel strain <sup>1</sup>**  
**Measles (Rubeola) <sup>1</sup>**  
**Plague <sup>1</sup>**  
**Poliomyelitis <sup>1</sup>**  
**Rabies, human <sup>1</sup>**  
**SARS <sup>1</sup>**

**Shellfish poisoning (domoic, paralytic)**  
**Smallpox <sup>1</sup>**  
**Tularemia <sup>1</sup>**  
**Viral hemorrhagic fever <sup>1</sup>**  
**Yellow fever <sup>1</sup>**  
**Outbreak, or suspected outbreak, of illness due to infectious agent or toxin <sup>1</sup>**

**Reportable within 7 days of case investigation completion or summary information required within 21 days of initial notification for the following:**

Acquired immunodeficiency syndrome (AIDS) (including AIDS in persons previously reported with HIV infection) <sup>2</sup>  
 Arboviral disease (West Nile virus disease, dengue, Eastern & Western equine encephalitis, etc.) <sup>1</sup>  
**Brucellosis\* <sup>1</sup>**  
**Burkholderia mallei or pseudomallei\* <sup>1</sup>**  
 Campylobacteriosis <sup>1</sup>  
 Chancroid <sup>2</sup>  
*Chlamydia trachomatis* <sup>2</sup>  
 Cryptosporidiosis <sup>1</sup>  
 Cyclosporiasis <sup>1</sup>  
 Enterohemorrhagic *E. coli* (see Shiga toxin-producing *E. coli*) <sup>1</sup>  
 Giardiasis <sup>1</sup>  
 Gonorrhea <sup>2</sup>  
 Granuloma inguinale <sup>2</sup>  
*Haemophilus influenzae* invasive disease <sup>1</sup>  
 Hantavirus pulmonary syndrome <sup>1</sup>  
 Hepatitis A – Acute <sup>1</sup>

Hepatitis B – acute <sup>1</sup>, chronic <sup>2</sup> (initial diagnosis only)  
 Hepatitis B – surface antigen + pregnant women <sup>3</sup>  
 Hepatitis C – acute <sup>1</sup>, chronic <sup>2</sup>  
 Hepatitis D – Acute <sup>1</sup>  
 Hepatitis E – Acute <sup>1</sup>  
 Herpes simplex <sup>2</sup>  
 HIV infection <sup>2</sup>  
 Immunization reactions (severe, adverse) <sup>3</sup>  
 Influenza-associated death (lab confirmed) <sup>1</sup>  
 Legionellosis <sup>1</sup>  
 Leptospirosis <sup>1</sup>  
 Listeriosis <sup>1</sup>  
 Lyme disease <sup>1</sup>  
 Lymphogranuloma venereum <sup>2</sup>  
 Malaria <sup>1</sup>  
 Meningococcal disease <sup>1</sup>  
 Monkeypox <sup>1</sup>  
 Mumps <sup>1</sup>  
 Pertussis <sup>1</sup>  
 Prion disease <sup>1</sup>  
**Psittacosis\* <sup>1</sup>**  
**Q Fever\* <sup>1</sup>**

Rabies, suspected human exposure <sup>1</sup>  
 Relapsing fever <sup>1</sup>  
 Rubella <sup>1</sup>  
 Salmonellosis <sup>1</sup>  
 Shiga toxin-producing *E. coli* infections (enterohemorrhagic *E. coli* including but not limited to, *E. coli* O157:H7) <sup>1</sup>  
 Shigellosis <sup>1</sup>  
 Syphilis <sup>2</sup>  
 Tetanus <sup>1</sup>  
 Trichinosis <sup>1</sup>  
 Tuberculosis <sup>2</sup>  
 Typhoid fever <sup>1</sup>  
 Vaccinia transmission <sup>1</sup>  
 Vancomycin-resistant *Staphylococcus aureus* (not to include vancomycin-intermediate) <sup>1</sup>  
 Varicella-associated death <sup>1</sup>  
 Vibriosis <sup>1</sup>  
 Yersiniosis <sup>1</sup>  
 Other rare disease of public health significance <sup>1</sup>  
 Unexplained critical illness or death <sup>1</sup>

**\* If bioterrorism is suspected, case must be immediately reported.**

**Reportable to:**

**<sup>1</sup> Communicable Disease Epidemiology**  
**<sup>2</sup> Infectious Disease and Reproductive Health**  
**<sup>3</sup> Immunization Program CHILD Profile**

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