

12 VAC 5-90-80. Reportable Disease List.

A. Reportable Disease List.

The board declares the following named diseases, toxic effects, and conditions to be reportable by the persons enumerated in 12 VAC 5-90-90. Conditions listed in capital and bold letters require rapid communication, as defined in subsection B of this section:

Acquired immunodeficiency syndrome (AIDS)
Amebiasis
ANTHRAX
Arboviral infection (e.g., EEE, LAC, SLE, WNV)
BOTULISM
Brucellosis
Campylobacter infection
Chancroid
Chickenpox
Chlamydia trachomatis infection
CHOLERA
Creutzfeld-Jakob disease if <55 years of age
Cryptosporidiosis
Cyclosporiasis
DIPHTHERIA
Ehrlichiosis
Escherichia coli O157:H7 and other enterohemorrhagic *E. coli* infections
Giardiasis
Gonorrhea
Granuloma inguinale
HAEMOPHILUS INFLUENZAE INFECTION, INVASIVE
Hantavirus pulmonary syndrome
Hemolytic uremic syndrome (HUS)
HEPATITIS A (IgM +)
Hepatitis B:
 Acute disease (IgM +)
 HBsAg positive pregnant woman
Hepatitis C (acute and chronic)
Hepatitis, Other Acute Viral
Human immunodeficiency virus (HIV) infection
Influenza
Kawasaki syndrome
Lead - elevated blood levels
Legionellosis
Leprosy (Hansen disease)
Listeriosis
Lyme disease
Lymphogranuloma venereum

Malaria
MEASLES (Rubeola)
MENINGOCOCCAL INFECTION
Mumps
Ophthalmia neonatorum
OUTBREAKS, ALL (including foodborne, nosocomial, occupational, toxic substance-
related, waterborne, and other outbreaks)
PERTUSSIS (Whooping cough)
PLAGUE
POLIOMYELITIS
PSITTACOSIS
Q fever
RABIES, HUMAN AND ANIMAL
Rabies treatment, post-exposure
Rocky Mountain spotted fever
Rubella (German measles), including congenital rubella syndrome
Salmonellosis
SEVERE ACUTE RESPIRATORY SYNDROME (SARS)
Shigellosis
Smallpox
Streptococcal disease, Group A, invasive
Streptococcus pneumoniae, invasive if <5 years of age
Syphilis (report PRIMARY and SECONDARY syphilis by rapid means)
Tetanus
Toxic shock syndrome
Toxic substance related illnesses
Trichinosis
TUBERCULOSIS DISEASE
Tuberculosis infection in children age <4 years (Mantoux skin test reaction \geq 10 mm)
Tularemia
Typhoid fever
Typhus
Unusual occurrence of disease of public health concern
VACCINIA, DISEASE OR ADVERSE EVENT
Vancomycin-resistant *Staphylococcus aureus*
Vibrio infection
Viral hemorrhagic fever
YELLOW FEVER

B. Reportable Diseases Requiring Rapid Communication.

Certain of the diseases in the list of reportable diseases, because of their extremely contagious nature or their potential for greater harm, or both, require immediate identification and control. Reporting of persons confirmed or suspected of having these diseases, listed below and in capital and bold letters in subsection A of this section and 12 VAC 5-90-90 B, shall be made within 24 hours by the most rapid means available, preferably that of telecommunication (e.g., telephone, telephone transmitted facsimile, telegraph, teletype, etc.) to the local health director or other professional employee of the department.

Anthrax
Botulism
Cholera
Diphtheria
Haemophilus influenzae infection, invasive
Hepatitis A
Measles (Rubeola)
Meningococcal infection
Outbreaks, all
Pertussis
Plague
Poliomyelitis
Psittacosis
Rabies in man and animals
Severe acute respiratory syndrome (SARS)
Syphilis, primary and secondary
Tuberculosis disease
Vaccinia, disease or adverse event
Yellow fever

C. Diseases to be Reported by Number of Cases.

The following disease in the list of reportable diseases shall be reported as number-of-cases only:

Influenza (by type, if available)

D. Human Immunodeficiency Virus (HIV) Infection.

Every physician practicing in this Commonwealth shall report to the local health department any patient of his who has tested positive for human immunodeficiency virus (HIV). Every person in charge of a medical care facility shall report the occurrence in or admission to the facility of a patient with HIV infection unless there is evidence that the

occurrence has been reported by a physician. When such a report is made, it shall include the information required in 12 VAC 5-90-90 A. Only individuals who have laboratory results which indicate the presence of HIV antigen, nucleic acid, or antibodies {such as at least two enzyme-linked immunosorbent assays (done in duplicate at the same time or singly at different times), and a supplemental test such as the western blot or by rapid tests with confirmation} are considered to have HIV infection.

E. Toxic Substance-Related Diseases or Illnesses.

All toxic substance-related diseases or illnesses, including pesticide and heavy metal poisoning or illness or disease resulting from exposure to an occupational dust or fiber or radioactive substance shall be reported.

If such disease or illness is verified or suspected and presents an emergency or a serious threat to public health or safety, the report of such disease or illness shall be by rapid communication as in subsection B of this section.

F. Outbreaks.

The occurrence of outbreaks or clusters of any illness which may represent a group expression of an illness which may be of public health concern shall be reported to the local health department by the most rapid means available.

G. Unusual or Ill-Defined Diseases or Emerging or Reemerging Pathogens.

Unusual or emerging conditions of public health concern shall be reported to the local health department by the most rapid means available. In addition, the commissioner or his designee may establish temporary surveillance systems for diseases or conditions that are not on the list of reportable diseases. Such surveillance may be established to identify cases (delineate the magnitude of the situation), to identify the mode of transmission and risk factors for the disease, and to identify and implement appropriate action to protect public health. Any person reporting information at the request of the Department of Health for special surveillance or other epidemiological studies shall be immune from liability as provided by ' 32.1-38 of the *Code of Virginia*.

H. Contact Tracing.

When notified about a disease specified in subsection A of this section, the local health department shall perform contact tracing for HIV infection, infectious syphilis, and tuberculosis and may perform contact tracing for the other diseases if deemed necessary to protect the public health. The local health director shall have the responsibility to accomplish contact tracing by either having patients inform their potential contacts directly or through obtaining pertinent information such as names, descriptions, and addresses to enable the health department staff to inform the contacts. All contacts of

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HIV infection shall be afforded the opportunity for appropriate counseling, testing, and individual face-to-face disclosure of their test results. In no case shall names of informants or infected persons be revealed to contacts by the health department. All information obtained shall be kept strictly confidential.