



# STOP

## and Report Infectious Disease

### Illinois Notifiable Disease and Conditions

Mandated reporters, such as health care providers, hospitals and laboratories, must report suspected or confirmed cases of these diseases to the local health department. Diseases marked “immediate” (in red) are reportable by phone as soon as possible, but within three hours. Diseases in **bold** are reportable within 24 hours. All other conditions not in red or bold are reportable within three days.

<b>Acute Flaccid Myelitis</b> African Tick Bite Fever Anaplasmosis <b>Any suspected bioterrorist threat (immediate)</b> <b>Any unusual case or cluster of cases that may indicate a public health hazard (immediate)</b> <b>Anthrax (immediate)</b> Arboviruses Babesiosis <b>Botulism, foodborne (immediate)</b> <b>Botulism, intestinal, wound, other</b> Bourbon virus <b>Brucellosis*</b> California Encephalitis virus Campylobacteriosis <i>Candida auris**</i> Carbapenem-resistant Enterobacterales** Chancroid Chikungunya virus Chlamydia <b>Cholera</b> <b>Coronavirus, Novel (immediate)</b> COVID-19 Deaths in those <18 yrs COVID-19 ICU Admissions <b>Cronobacter in infants &lt;12 months</b> Cryptosporidiosis Cyclosporiasis Dengue viruses 1-4 <b>Diphtheria (immediate)</b> Eastern Equine Encephalitis virus Ehrlichiosis <b>Escherichia coli</b> infections ( <i>E. coli</i> O157, and other Shiga Toxin Producing <i>E. coli</i> ) Gonorrhea <b>Haemophilus influenzae</b> , invasive <b>Hantavirus pulmonary syndrome</b>	Heartland virus <b>Hemolytic uremic syndrome, post diarrheal</b> <b>Hepatitis A</b> Hepatitis B, acute infection, perinatal and non-acute confirmed infection Hepatitis C, acute infection, perinatal and non-acute confirmed infection Histoplasmosis HIV infection <b>Influenza, deaths in those &lt;18 yrs</b> <b>Influenza A, novel (immediate)</b> Influenza, ICU admissions Jamestown Canyon virus Japanese Encephalitis Keystone virus La Crosse virus Legionellosis Leptospirosis Listeriosis Lyme disease Malaria <b>Measles: Suspect, Probable or Confirmed (immediate)</b> <b>Melioidosis due to <i>Burkholderia pseudomallei</i></b> <b>Middle Eastern Respiratory Syndrome (MERS) (immediate)</b> Mpox Multi-drug Resistant Organisms** <b>Mumps</b> <b><i>Neisseria meningitidis</i>, Invasive Disease and Purpura Fulminans</b> <b>Outbreaks of public health significance</b> <b>Pertussis (whooping cough)</b> <b>Plague (immediate)</b> <b>Poliomyelitis (immediate)</b> Powassan virus Psittacosis due to <i>Chlamydia psittaci</i>	<b>Q fever (<i>Coxiella burnetii</i>)*</b> <b>Rabies, human and potential human exposure and animal rabies</b> Respiratory Syncytial Virus (RSV): deaths in those <18 yrs Respiratory Syncytial Virus (RSV): ICU Admissions Rocky Mountain Spotted Fever (RMSF) <b>Rubella</b> St. Louis Encephalitis virus Salmonellosis, other than typhoid or paratyphoid <b>Severe Acute Respiratory Syndrome (SARS) (immediate)</b> Shigellosis <b>Smallpox (immediate)</b> Snowshoe hare virus Spotted fever rickettsioses <b><i>S. aureus</i> infections with intermediate or high level resistance to vancomycin</b> <b>Group A streptococcal infections, invasive disease, in persons admitted to the hospital or residing in a residential facility</b> <i>S. pneumoniae</i> , invasive in those <5 yrs Syphilis Tetanus <b>Toxic shock syndrome due to <i>S. aureus</i></b> Trichinosis Trivitattus virus Tuberculosis <b>Tularemia*</b> <b>Typhoid fever and Paratyphoid fever</b> <b>Typhus</b> <b>Varicella (chickenpox)</b> Vibriosis (other than Toxigenic <i>Vibrio cholera</i> O1 or O139) West Nile virus Western Equine Encephalitis virus Yellow Fever virus Zika virus
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\*If bioterrorism suspected then report immediately (within three hours)  
\*\*Reportable to the Extensively Drug-Resistant Organism (XDRO) Registry by providers

Laboratories also must report positive test results of these diseases electronically to their local health department within the time frame indicated.

### All reports are confidential and should include—

- the disease or condition being reported
- patient’s name, date of birth, age, sex, race/ethnicity, address, and telephone number
- physician’s name & telephone number
- clinical information
- method of diagnosis

### TO REPORT A CASE

contact your local health department:

During regular business hours, call \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_.

For emergencies after business hours, call \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_.

If no local health department is available, contact the  
**Illinois Department of Public Health**  
217-785-7165 • TTY (hearing impaired use only) 800-547-0466

Effective 2/27/24