NOTIFIABLE DISEASE

CONDITION REPORTING

All Georgia physicians, laboratories, and other health care providers are required by law to report patients with the following conditions.

LEGEND

- * To be determined in consultation with DPH Epidemiology. Based on public health impact potential. Ultimate decision made by State Health Officer and State Epidemiologist.
- ** Invasive isolated from blood, bone, CSF, joint, pericardial, peritoneal, or pleural fluid.
- *** ALT and total bilirubin associated with hepatitis A, B, or C serology should be reported
- **** L. monocytogenes resulting in infant mortality is reportable to Vital Records.
 - Potential agent of bioterrorism

SUBMISSION REQUIREMENTS FOR CLINICAL MATERIALS¹

7 Hold 7 days and submit if DPH requests

DPH does not routinely test but submission may occur upon DPH approval

REPORT IMMEDIATELY			
Call: District Health Office or 1-866-PUB-HL	ΓH (1-8	866-782-4584)	
all outbreaks/clusters (including infectious and		measles (rubeola)	A
non-infectious causes, toxic substance and		melioidosis 🔥	A
drug-related, and any other outbreak)		meningitis (specify agent when reporting)	7
unusual occurrence of disease of public health concern*		meningococcal disease, invasive infections **	A
		novel influenza A virus infections	A
all acute arboviral infections California serogroup viruses (California encephalitis, Jamestown Canyon, keystone, La Crosse, snowshoe hare, trivitattus) chikungunya virus dengue virus		novel respiratory virus infections (SARS, MERS, etc.)	A
		orthopoxvirus infections (i.e., smallpox, mpox) 🐴	A
		pertussis	A
equine encephalitis viruses (eastern, Venezuelan,		plague 💫	A
western) • Powassan virus		poliomyelitis	· ·
St. Louis encephalitis virus		Q fever 💫	A
yellow fever virus		rabies (human and animal infections)	A
Zika virus		SARS-CoV-2 infections (COVID-19)	
amebic (free living) infections (Acanthamoeba spp., Balamuthia mandrillaris, Naegleria fowleri, Sappinia spp., etc)		positive results (excluding antibody and at-home tests)	A
animal bites		Staphylococcus aureus infections with vancomycin	•
anthrax 🔥	A	MIC ≥ 4 mcg / mL	
botulism 🚱	A	Shiga-toxin producing <i>E. coli</i> infections	A
brucellosis (<i>Brucella</i> spp. including B. <i>abortus</i> , B. canis, B. melitensis, B. suis) 各	A	positive non-treponemal or treponemal test during pregnancy congenital	
Cronobacter, Invasive (infants under 1 year of age)	A		A
cholera (toxigenic <i>Vibrio cholerae</i>)	A		
diphtheria	A	tuberculosis (TB)	
Haemophilus influenzae, invasive infections**	A	 confirmed or presumed active TB disease, any age latent TB infection (inactive TB) in children <6 	G
hantavirus pulmonary syndrome (HPS)		tularemia 💫	
hemolytic uremic syndrome (HUS)			
hepatitis A ***		viral hemorrhagic fevers 💫	(
reactive anti-HAV IgM			

Report cases electronically through the state electronic notifiable disease surveillance system at sendss.state.ga.us

For more information:

www.dph.ga.gov/disease-reporting



REPORT WITHIN 7 DAYS			
acute flaccid myelitis (AFM)		hepatitis D (acute and chronic)	
acquired immunodeficiency syndrome (AIDS)#		hepatitis E (acute)	
anaplasmosis		HIV infection#	
aseptic meningitis		 Infection, any stage OR progression to stage 	
babesiosis		3 (AIDS)	
blood lead levels		Perinatal HIV exposure	
campylobacteriosis	A	influenza, RSV, or COVID-19-associated death	
Candida auris infections	A	(all ages)	A
carbapenem-resistant Enterobacterales (CRE)		legionellosis	7
infections	A	leprosy (Hansen's disease) (Mycobacterium	
Enterobacter spp.Escherichia coli		leprae)	A
Klebsiella spp.		leptospirosis	
chancroid		listeriosis ****	A
Chlamydia trachomatis Infection (including		Lyme disease	
Lymphogranuloma venereum	A	malaria	A
Creutzfeldt-Jakob Disease (CJD), confirmed and		maternal death (during pregnancy or within	
suspected cases < 55 years old		1 year of end of pregnancy)###	
cryptosporidiosis	7	multisystem inflammatory syndrome in	
cyclosporiasis	A	children (MIS-C)	
ehrlichiosis		mumps	7
giardiasis		psittacosis	
gonorrhea	A	rubella (including congenital)	A
hearing loss (confirmed or suspected permanent,		salmonellosis (including typhoid fever and	
<6 years old)##		paratyphoid fever)	A
hepatitis B (acute and chronic) ***			A
 reactive HBsAg and all associated HBV lab 		Spotted Fever Rickettsiosis (Rickettsia spp.)	A
		streptococcal disease, group A or B (invasive) **	7
		Streptococcus pneumoniae infection (invasive) **	7
markers (HBsAg anti-HBc IgM, total anti-HBc,		report with antibiotic-resistance information	
anti-HBe, HBeAg, anti-HBs)		tetanus	
		toxic shock syndrome (TSS)	
		varicella (chickenpox)	7
all HBsAg and anti-HBs (positive, negative,		vibriosis (Vibrio spp.)	A
indeterminate) for children ≤ 2 years old		yersiniosis	A
hepatitis C (acute and chronic) ***		3	
HCV RNA by PCR (both detected and undetected)			
 detected HCV genotype 			
all (positive, negative, indeterminate) anti-HCV and			
HCV RNA by PCR for children ≤ 3 years of age			
 reactive HBsAg and all associated HBV lab markers (HBV DNA, anti-HBc IgM, total anti-HBc, anti-HBe, HBeAg, anti-HBs) detected HBV DNA and all associated HBV lab markers (HBsAg anti-HBc IgM, total anti-HBc, anti-HBe, HBeAg, anti-HBs) undetectable HBV DNA HBsAg reactive pregnant women perinatal HBV exposures all HBsAg and anti-HBs (positive, negative, indeterminate) for children ≤ 2 years old hepatitis C (acute and chronic) *** reactive anti-HCV (both serology and point-of-care rapid testing) HCV RNA by PCR (both detected and undetected) detected HCV genotype anti-HCV reactive or HCV RNA detected pregnant women perinatal HCV exposures all (positive, negative, indeterminate) anti-HCV and 		Streptococcus pneumoniae infection (invasive) ** • report with antibiotic-resistance information tetanus toxic shock syndrome (TSS) varicella (chickenpox) vibriosis (Vibrio spp.)	(

REPORT WITHIN 14 DAYS

Neonatal Abstinence Syndrome (NAS). Information for reporting NAS is available at **dph.georgia.gov/nas**.

Report cases electronically through the state electronic notifiable disease surveillance system at **sendss.state.ga.us**

REPORT WITHIN 1 MONTH

Birth Defects, including fetal deaths of at least 20 weeks gestational age and children < 6 years old. Information for reporting birth defects available at dph.georgia.gov/birth-defects-reporting.

Healthcare-associated Infections (HAIs). For facilities required to report HAI data to CMS via NHSN. Report in accordance with the NHSN protocol. Reporting requirements and information available at **dph.georgia.gov/epidemiology/healthcare-associated-infections/nhsn-notifiable-reporting**.

REPORT WITHIN 6 MONTHS

Benign brain and central nervous system tumors

Cancer

Report forms and reporting information for tumors and cancer is available at

dph.georgia.gov/chronic-disease-prevention/georgia-comprehensive-cancer-registry/reporting-cancer.

REPORTING FOR OTHER CONDITIONS

Report forms and reporting requirements available at

dph.georgia.gov/epidemiology/georgias-hivaids-epidemiology-section/hivaids-case-reporting.

Hearing loss case report form isavailable at dph.georgia.gov/EHDI.

Reporting information for maternal deaths is available at dph.georgia.gov/maternal-mortality.

- ¹ "Clinical materials" is defined as: A. a clinical isolate containing the infectious agent for which submission of material is required; or B. if an isolate is not available, material containing the infectious agent for which submission of material is required, in the following order of preference: (1) a patient specimen; (2) nucleic acid; or (3) other laboratory material.
- ² "Invasive disease" is defined as: isolated from blood, bone, CSF, joint, pericardial, peritoneal, or pleural fluid.