

## State of California—Health and Human Services Agency California Department of Public Health



September 13, 2019

Dear Healthcare Provider Colleagues,

The California Department of Public Health (CPDH), in consultation with the California Conference of Local Health Officers, recently updated Title 17 section 2500 of the California Code of Regulations. Section 2500 specifies that healthcare providers must report all cases of the listed diseases and conditions to the local health department within the specified timeframe. The updated 2500 diseases and condition list is posted on the CDPH Division of Communicable Disease Control website (link: Reportable Diseases and Conditions).

This letter is to inform you of these changes and to remind you of the reporting requirements outlined in this section. These changes, which go into effect October 1, 2019, are summarized below.

## Changes to List of Reportable Diseases and Conditions

- The following have been **removed** and are no longer required to be reported to the local health department:
  - Amebiasis
  - *Chlamydia trachomatis* infections, including lymphogranuloma venereum (LGV). Note that *Chlamydia trachomatis* infections will continue to be reported by laboratories.
  - Streptococcal Infections (Outbreaks of Any Type and Individual Cases in Food Handlers and Dairy Workers Only)
- The following have been **added** and are now required to be reported to the local health department:
  - Human Immunodeficiency Virus (HIV) infection, any stage report within seven (7)
    calendar days
  - Middle East Respiratory Syndrome (MERS) report immediately by telephone
  - Paratyphoid Fever report within one working day
- The following have been reworded for clarity:
  - Hepatitis B (specify acute case or chronic) reworded to Hepatitis B (specify acute, chronic, or perinatal)
  - Hepatitis C (specify acute case or chronic) reworded to Hepatitis C (specify acute, chronic, or perinatal)
  - Human Immunodeficiency Virus (HIV) infection, stage 3 (AIDS) reworded to Human Immunodeficiency Virus (HIV) infection, progression to stage 3 (AIDS)



- Influenza, novel strains (human) reworded to Influenza due to novel strains (human)
- Respiratory syncytial virus (only report a death in a patient less than five years of age) reworded to Respiratory syncytial virus-associated deaths in laboratory-confirmed cases less than five years of age
- Syphilis reworded to Syphilis (all stages, including congenital)
- The following have a change in reporting requirement:
  - Dengue virus infection now required to be reported within one working day of identification (previously immediately reportable)
  - Escherichia coli: shiga toxin producing (STEC) including E. coli O157 now required to be reported within one working day of identification (previously immediately reportable)
  - Influenza-associated deaths in laboratory confirmed cases now only reportable in persons less than 18 years of age (previously ages 0-64)
  - Yellow Fever now required to be reported within one working day of identification (previously immediately reportable)
  - **Zika virus infection** now required to be reported within one working day of identification (previously immediately reportable)

## **Changes to Content of Reports**

- The following changes have been made to what information must be reported:
  - Sex changed to gender
  - Pregnancy status now required to be reported (if known)
  - Complications of gonorrhea or chlamydia infections no longer included

## **Changes to Definitions**

 Several of the definitions of Section 2500 have been updated. These include the definition for Case, Drug susceptibility testing, Epidemiologically linked case, Foodborne disease, Foodborne disease outbreak, Laboratory findings, Outbreak, Sexually Transmitted Diseases, Suspected case, and Waterborne disease outbreak.

Thank you for your timely and complete reporting of notifiable diseases. You are a vital part of California's ability to detect and timely respond to infectious disease threats.

Sincerely,

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State Epidemiologist

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