

# WEST VIRGINIA REPORTABLE DISEASES AND CONDITIONS - HEALTH CARE PROVIDERS AND FACILITIES

## CATEGORY 1 REPORTABLE TO THE LOCAL HEALTH DEPARTMENT WITHIN 24 HOURS OF DIAGNOSIS

Animal Bites  
Anthrax (*Bacillus anthracis*)\*\*  
Botulism (*Clostridium botulinum*)\* / \*\*  
Brucellosis (*B. abortus*, *B. melitensis*, *B. suis*, *B. canis*)  
Cholera (*Vibrio cholerae*)\*\*  
Dengue Fever  
Diphtheria (*Corynebacterium diphtheriae*)\*  
Enterohemorrhagic *E.coli* including but not limited to  
*E coli* O157:H7\*\*  
Foodborne Disease\*\*  
*Haemophilus influenzae*, Invasive Disease\*  
Hemolytic Uremic Syndrome, postdiarrheal  
Hepatitis A, acute\*  
Hepatitis B, acute or perinatal\*  
Hepatitis Delta\*  
Meningococcal Disease, Invasive (*N. meningitidis*)\*  
Outbreaks or clusters of any illness or condition;  
suspect or confirmed  
Pertussis (Whooping Cough) (*Bordetella pertussis*)\*  
Plague (*Yersinia pestis*)\*\*  
Poliomyelitis\*  
Rabies, human\* or animal\*\*  
Rubella (German measles)\*  
Rubeola (Measles)\*  
Smallpox\*/\*\*  
Staphylococcus aureus with GISA/VISA or  
GRSA/VRSA susceptibilities  
Tuberculosis (include antibiotic susceptibilities)\*  
Tularemia (*Francisella tularensis*)\*\*  
Typhoid Fever (*Salmonella typhi*)\* / \*\*  
Waterborne Disease \*\*  
Yellow Fever

## CATEGORY 2 REPORTABLE TO THE LOCAL HEALTH DEPARTMENT WITHIN 1 WEEK OF DIAGNOSIS

Amebiasis (*Entamoeba histolytica*) \*\*  
Campylobacteriosis (*Campylobacter jejuni*, *C. coli*)\*\*  
Chickenpox (Varicella) -- Numerical totals only  
Cryptosporidiosis (*Cryptosporidium parvum*)\*\*  
Cyclospora infection\*\*  
Ehrlichiosis\*  
Encephalitis, Arboviral \*\*  
Eastern Equine Encephalitis  
LaCrosse Encephalitis (California Group)  
St. Louis Encephalitis  
Western Equine Encephalitis  
West Nile Encephalitis  
Encephalitis, Other primary and unspecified  
Giardiasis (*Giardia lamblia*)\*\*  
Hantavirus Disease\*  
Influenza-Like Illness -- Numerical totals only  
Legionellosis\*  
Leptospirosis  
Listeriosis (*Listeria monocytogenes*)\* / \*\*  
Lyme Disease (*Borrelia burgdorferi*)\*  
Malaria\*  
Meningitis, Other Bacterial -- organisms not otherwise  
listed\*  
Meningitis, Viral or Aseptic  
Mumps\*  
Psittacosis (*Chlamydophila psittaci*)  
Rheumatic Fever  
Rocky Mountain Spotted Fever\*  
Rubella Congenital Syndrome\*  
Salmonellosis (except Typhoid Fever)\*\*  
Shigellosis (*S. dysenteriae*, *S. boydii*, *S. flexneri*, *S. sonnei*)\*\*  
Streptococcal Disease, invasive group A (*S pyogenes*)  
and/or Streptococcal Toxic Shock Syndrome\*\*  
Streptococcal Disease, invasive group B  
*Streptococcus pneumoniae*, invasive disease – include

antimicrobial susceptibility patterns\*\*  
Tetanus (*Clostridium tetani*)\*  
Toxic Shock Syndrome  
Trichinosis\*  
Tuberculosis, latent infection (in last 2 years or positive  
test in children <5 yrs.)\*  
Unexplained or ill-defined illness, condition, or  
health occurrence of public health significance

## CATEGORY 3 REPORTABLE TO THE WV BUREAU FOR PUBLIC HEALTH (STATE HEALTH DEPARTMENT) WITHIN 1 WEEK (UNLESS OTHERWISE NOTED)

INFECTIOUS  
AIDS (within 30 days)\*  
Chancroid (*Haemophilus ducreyi*)\*  
*Chlamydia trachomatis*\*  
Gonococcal Disease -- Drug-resistant disease,  
Neonatal conjunctivitis, or Pelvic Inflammatory  
Disease (within 24 hours)\*  
Gonococcal Disease -- all other\*  
Hepatitis C/Other non-A or non-B, acute\* or chronic\*\*  
infection  
Herpes, Genital\*  
HIV (within 30 days)\*  
Syphilis – primary, secondary, early latent, or congenital  
(within 24 hours)\*  
Syphilis -- late latent, late symptomatic, or neurosyphilis\*

### \* Requires a supplemental CDC\* or WVBPH\*\* form

For questions on disease reporting or for epidemiologic  
consultation, call your local health department or the WV Bureau for  
Public Health, Division of Surveillance and Disease Control:  
HIV/AIDS Surveillance 800-423-1271; Immunization Program 800-  
642-3634; STD Program 800-642-8244; WV Statewide  
Immunization Information System (WVSIIS) 877-408-8930;  
Tuberculosis Program 800-330-8126; all other diseases 800-423-  
1271 or 304-558-5358. Website: [www.wvdhhr.org/bph/oehp/sdc](http://www.wvdhhr.org/bph/oehp/sdc)

## NON-INFECTIOUSREPORTABLE CONDITIONS

(See "Special Notes")

Administration of Immunizations (via WVSIS)

Autism Spectrum Disorders

Birth Defects

Cancer (in time frame noted in cancer rules)

Hemophilia

Lead, all blood lead test results

Non-Malignant Intracranial and CNS tumors

Occupational Illness

Traumatic Brain Injury

Reporting of these diseases and conditions is required by state law (WV Code 16-3-1; 64 CSR 7). Failure to report may result in a fine of up to \$500 per offense.

Standard communicable disease case report forms, supplemental forms, STD (VD-91), TB, and HIV/AIDS report forms can be obtained through your local health department.

### **SPECIAL NOTES:**

**Immunizations:** Immunizations administered to children through the age of 6 years are reportable. These should be submitted to the WV Statewide Immunization Information System (WVSIS) electronically or by fax to 304-558-1899. Further information on immunization reporting can be obtained calling WVSIS at 877-408-8930. Website: [www.wvdhhr.org/sisweb](http://www.wvdhhr.org/sisweb)

**Autism Spectrum Disorder:** The Autism Spectrum Disorder registry is maintained by Marshall University Autism Training Center. Any questions regarding reporting Autism Spectrum Disorder or acquiring reporting forms should be directed to the WV Autism Registry at 800-344-5115 or 304-696-2332.

**Birth Defects:** Birth defects are reported through hospital medical records departments. Report forms and information on reporting of birth defects can be obtained by calling the Division of Research and Evaluation, Office of Maternal and Child Health at 304-558-5388.

**Cancer and Non-Malignant Intracranial and CNS Tumors:** Cancers and non-malignant intracranial and CNS tumors diagnosed or treated in a hospital are reported through hospital based cancer registries. Cancer cases diagnosed and seen exclusively outside the hospital setting should be reported by providers using a form available from the WV Cancer Registry at 800-423-1271.

**Hemophilia:** Diagnoses can be recorded on the West Virginia Bureau for Public Health Confidential Reportable Disease Case Report and submitted to the WV State Hemophilia Program, Division of Surveillance and Disease Control. Questions about reporting congenital bleeding disorders should be directed to the State Program at 304-558-5358 or 800-423-1271.

**Lead:** Reported information should include the patient's name, address (including county), date of birth, sex, and lead level as well as the reporting provider's name and address, and any other information required by the director relevant to the purpose of this rule. Questions on lead reporting should be directed to the Office of Maternal and Child Health, Division of Research and Evaluation at 304-558-7255.

**Traumatic Brain Injury:** Patients with a GCS of 13 or below who are either admitted for  $\geq 24$  hours or are transferred to an outlying facility are reportable by trauma registrars to the Office of Emergency Medical Services Trauma Registry in conjunction with the WV State Program for Traumatic Brain and Spinal Cord Injury at the West Virginia University Center for Excellence in Disabilities (WVUCED), Robert C. Byrd Health Sciences Center, West Virginia University. For statistical and planning purposes, reporting of patients with concussions, contusions, and minor head trauma who are treated and released from provider offices, urgent care centers, and emergency departments is requested, though not required. These can be reported via a simple form provided by the Office of Emergency Services and WVUCED Program. This form and other information on reporting Traumatic Brain Injury can be obtained by calling WVUCED at 877-724-8244 or 304-293-4692; website: [www.ced.wvu.edu](http://www.ced.wvu.edu)

Your Local Health Department:

West Virginia Department of Health and Human Resources / Bureau for Public Health:

Division of Surveillance and Disease Control  
Room 125  
350 Capitol St.  
Charleston, WV 25301-3715  
Phone: 304-558-5358 Fax: 304-558-6335