

# Notifiable Conditions & the Health Care Provider

The following conditions are notifiable to local public health authorities in Washington in accordance with WAC 246-101. Timeframes for notification are indicated in footnotes. **Immediately notifiable conditions are indicated in bold** and should be reported when suspected or confirmed.

Acquired immunodeficiency syndrome (AIDS) (including AIDS in persons previously reported with HIV infection) <sup>3d</sup>	Lymphogranuloma venereum <sup>3d</sup>
<b>Animal bites (when human exposure to rabies is suspected)</b> <sup>Imm</sup>	Malaria <sup>3d</sup>
<b>Anthrax</b> <sup>Imm</sup>	<b>Measles (rubeola) acute disease only</b> <sup>Imm</sup>
Arboviral disease (West Nile virus disease, dengue, Eastern & Western equine encephalitis, St Louis encephalitis, and Powassan) <sup>3d</sup>	<b>Meningococcal disease (invasive)</b> <sup>Imm</sup>
<b>Botulism (foodborne, wound and infant)</b> <sup>Imm</sup>	<b>Monkeypox</b> <sup>Imm</sup>
Brucellosis ( <i>Brucella</i> species) <sup>24h</sup>	Mumps (acute disease only) <sup>24h</sup>
<b>Burkholderia mallei (Glanders) and pseudomallei (Meliodosis)</b> <sup>Imm</sup>	<b>Outbreaks of suspected foodborne origin</b> <sup>Imm</sup>
Campylobacteriosis <sup>3d</sup>	<b>Outbreaks of suspected waterborne origin</b> <sup>Imm</sup>
Chancroid <sup>3d</sup>	<b>Paralytic shellfish poisoning</b> <sup>Imm</sup>
<i>Chlamydia trachomatis</i> infection <sup>3d</sup>	Pertussis <sup>24h</sup>
<b>Cholera</b> <sup>Imm</sup>	<b>Plague</b> <sup>Imm</sup>
Cryptosporidiosis <sup>3d</sup>	<b>Poliomyelitis</b> <sup>Imm</sup>
Cyclosporiasis <sup>3d</sup>	Prion disease <sup>3d</sup>
<b>Diphtheria</b> <sup>Imm</sup>	Psittacosis <sup>24h</sup>
<b>Disease of suspected bioterrorism origin</b> <sup>Imm</sup>	Q fever <sup>24h</sup>
<b>Domoic acid poisoning</b> <sup>Imm</sup>	<b>Rabies (confirmed human or animal)</b> <sup>Imm</sup>
<b>E. coli - Refer to "Shiga toxin producing E. coli"</b> <sup>Imm</sup>	<b>Rabies, suspected human exposure</b> <sup>Imm</sup>
<b>Emerging condition with Outbreak potential</b> <sup>Imm</sup>	<b>Relapsing fever (borreliosis)</b> <sup>24h</sup>
Giardiasis <sup>3d</sup>	<b>Rubella (including congenital rubella syndrome) (acute disease only)</b> <sup>Imm</sup>
Gonorrhea <sup>3d</sup>	Salmonellosis <sup>24h</sup>
Granuloma inguinale <sup>3d</sup>	<b>SARS</b> <sup>Imm</sup>
<b>Haemophilus influenzae (invasive disease, children &lt; age 5)</b> <sup>Imm</sup>	<b>Shiga toxin-producing E. coli infections (including but not limited to E. coli 0157:H7)</b> <sup>Imm</sup>
Hantavirus pulmonary syndrome <sup>24h</sup>	Shigellosis <sup>24h</sup>
Hepatitis A, acute infection <sup>24h</sup>	<b>Smallpox</b> <sup>Imm</sup>
Hepatitis B, acute <sup>24h</sup>	Syphilis (including congenital) <sup>3d</sup>
Hepatitis B, chronic (initial diagnosis/previously unreported cases) <sup>Mo</sup>	Tetanus <sup>3d</sup>
Hepatitis B, surface antigen positive pregnant women <sup>3d</sup>	Trichinosis <sup>3d</sup>
Hepatitis C, acute <sup>3d</sup> and chronic <sup>Mo</sup> (initial diagnosis only)	<b>Tuberculosis</b> <sup>Imm</sup>
Hepatitis D (acute and chronic infections) <sup>3d</sup>	<b>Tularemia</b> <sup>Imm</sup>
Hepatitis E (acute infection) <sup>24h</sup>	<b>Vaccinia transmission</b> <sup>Imm</sup>
Herpes simplex, neonatal and genital (initial infection only) <sup>3d</sup>	Vancomycin-resistant <i>Staphylococcus aureus</i> (not to include vancomycin intermediate) <sup>24h</sup>
HIV infection <sup>3d</sup>	Varicella-associated death <sup>3d</sup>
<b>Influenza, novel or untypable strain</b> <sup>Imm</sup>	Vibriosis <sup>24h</sup>
Influenza-associated death (lab confirmed) <sup>3d</sup>	<b>Viral hemorrhagic fever</b> <sup>Imm</sup>
HIV infection <sup>3d</sup>	<b>Yellow fever</b> <sup>Imm</sup>
Legionellosis <sup>24h</sup>	Yersiniosis <sup>24h</sup>
Leptospirosis <sup>24h</sup>	Other rare diseases of public health significance <sup>24h</sup>
Listeriosis <sup>24h</sup>	Unexplained critical illness or death <sup>24h</sup>
Lyme disease <sup>3d</sup>	

The following diagnoses are notifiable to the Washington State Department of Health in accordance with WAC 246-101. Timeframes for notification are indicated in footnotes. **Immediately notifiable conditions are indicated in bold** and should be reported when suspected or confirmed.

Asthma, occupational (suspected or confirmed) <sup>Mo</sup>	<b>1-888-66SHARP</b>
Birth Defects: Autism spectrum disorders, Cerebral palsy, Alcohol related birth defects <sup>Mo</sup>	<b>360-236-3533</b>
<b>Pesticide Poisoning (hospitalized, fatal, or cluster)</b> <sup>Imm</sup>	<b>1-800-222-1222</b>
Pesticide Poisoning (all other) <sup>3d</sup>	<b>1-800-222-1222</b>

Notification time frame:

**Imm Immediately**, <sup>24h</sup> Within 24 hours,  
<sup>3d</sup> Within 3 business days, <sup>Mo</sup> Monthly

Monday – Friday, 9:00 a.m. to 5:00 p.m.

Call the Kittitas County Public Health Department at (509) 962-7515.

After hours, holidays, or weekends:

Call the Kittitas County Public Health Emergency Phone at 1-800-839-1922.

For more information, please see WAC 246-101 or <http://www.doh.wa.gov/notify>

If you cannot reach anyone with the Kittitas County Public Health Department please call the 24-hour Washington State Department of Health Hotline at: 1-877-539-4344