

# Reportable Diseases/Conditions in Florida

## Practitioner\* List 11/24/08

Did you know that you are required by Florida statute\*\* to report certain diseases to your local county health department?

\*Reporting requirements for laboratories differ. For specific information on disease reporting, consult Rule 64D-3, Florida Administrative Code (FAC).

- ! = Report immediately 24/7 by phone upon initial suspicion or laboratory test order
- ☎ = Report immediately 24/7 by phone
- = Report next business day
- + = Other reporting timeframe

! Any disease outbreak	Granuloma inguinale*	! Rabies (possible exposure)
! Any case, cluster of cases, or outbreak of a disease or condition found in the general community or any defined setting such as a hospital, school or other institution, not listed below that is of urgent public health significance. This includes those indicative of person to person spread, zoonotic spread, the presence of an environmental, food or waterborne source of exposure and those that result from a deliberate act of terrorism.	! <i>Haemophilus influenzae</i> (meningitis and invasive disease)	! Ricin toxicity
** Acquired Immune Deficiency Syndrome (AIDS)+	Hansen's disease (Leprosy)*	Rocky Mountain spotted fever*
Amebic encephalitis*	☎ Hantavirus infection	! Rubella (including congenital)
Anaplasmosis*	☎ Hemolytic uremic syndrome	St. Louis encephalitis (SLE) virus disease (neuroinvasive and non-neuroinvasive)*
! Anthrax	☎ Hepatitis A	Salmonellosis*
Arsenic poisoning*	Hepatitis B, C, D, E, and G*	Saxitoxin poisoning including paralytic shellfish poisoning (PSP)*
! Botulism (foodborne, wound, unspecified, other)	Hepatitis B surface antigen (HBsAg) (positive in a pregnant woman or a child up to 24 months old)*	! Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV) disease
Botulism (infant)*	Herpes simplex virus (HSV) (in infants up to 60 days old with disseminated infection with involvement of liver, encephalitis and infections limited to skin, eyes and mouth; anogenital in children ≤ 12 yrs)*	Shigellosis*
! Brucellosis	** Human Immunodeficiency Virus (HIV) infection (all, and including neonates born to an infected woman, exposed newborn)+	! Smallpox
California serogroup virus (neuroinvasive and non-neuroinvasive disease)*	Human papillomavirus (HPV) (associated laryngeal papillomas or recurrent respiratory papillomatosis in children ≤ 6 years of age; anogenital in children ≤ 12 yrs)*	<i>Staphylococcus aureus</i> , community associated mortality*
Campylobacteriosis*	! Influenza due to novel or pandemic strains	☎ <i>Staphylococcus aureus</i> (infection with intermediate or full resistance to vancomycin, VISA, VRSA)
Cancer (except non-melanoma skin cancer, and including benign and borderline intracranial and CNS tumors)+	☎ Influenza-associated pediatric mortality (in persons aged < 18 yrs)	☎ Staphylococcal enterotoxin B (disease due to)
Carbon monoxide poisoning*	Lead poisoning (blood lead level ≥ 10µg/dL); additional reporting requirements exist for hand held and/or on-site blood lead testing technology, see 64D-3 FAC*	Streptococcal disease (invasive, Group A)*
Chancroid*	Legionellosis*	<i>Streptococcus pneumoniae</i> (invasive disease)*
Chlamydia*	Leptospirosis*	Syphilis*
! Cholera	☎ Listeriosis	☎ Syphilis (in pregnant women and neonates)
Ciguatera fish poisoning (Ciguatera)*	Lyme disease*	Tetanus*
Congenital anomalies*	Lymphogranuloma venereum (LGV)*	Toxoplasmosis (acute)*
Conjunctivitis (in neonates ≤ 14 days old)*	Malaria*	Trichinellosis (Trichinosis)*
Creutzfeldt-Jakob disease (CJD)*	! Measles (Rubeola)	Tuberculosis (TB)*
Cryptosporidiosis*	! Melioidosis	! Tularemia
Cyclosporiasis*	Meningitis (bacterial, cryptococcal, mycotic)*	☎ Typhoid fever
Dengue*	! Meningococcal disease (includes meningitis and meningococemia)	! Typhus fever (disease due to <i>Rickettsia prowazekii</i> infection)
! Diphtheria	Mercury poisoning*	Typhus fever (disease due to <i>Rickettsia typhi</i> , <i>R. felis</i> infection)*
Eastern equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)*	Mumps*	! Vaccinia disease
Ehrlichiosis*	☎ Neurotoxic shellfish poisoning	Varicella (Chickenpox)*
Encephalitis, other (non-arboviral)*	☎ Pertussis	Varicella mortality*
☎ Enteric disease due to: <i>Escherichia coli</i> , O157:H7 <i>Escherichia coli</i> , other pathogenic <i>E. coli</i> including entero-toxigenic, invasive, pathogenic, hemorrhagic, aggregative strains and shiga toxin positive strains	Pesticide-related illness and injury*	! Venezuelan equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)
Giardiasis*	! Plague	Vibriosis (Vibrio infections)*
! Glanders	! Poliomyelitis, paralytic and non-paralytic	! Viral hemorrhagic fevers (Ebola, Marburg, Lassa, Machupo)
Gonorrhoea*	Psittacosis (Ornithosis)*	West Nile virus disease (neuroinvasive and non-neuroinvasive)*
	Q Fever*	Western equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)*
	☎ Rabies (human, animal)	! Yellow fever

You are an invaluable part of Florida's disease surveillance system.

For more information, please call the epidemiology unit at your local county health department or the Bureau of Epidemiology, Florida Department of Health (FDOH): 850-245-4401 or visit [http://www.doh.state.fl.us/disease\\_ctrl/epi/topics/surv.htm](http://www.doh.state.fl.us/disease_ctrl/epi/topics/surv.htm)



\*\*Section 381.0031(1.2), Florida Statutes provides that "Any practitioner, licensed in Florida to practice medicine, osteopathic medicine, chiropractic, naturopathy, or veterinary medicine, who diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health." The FDOH county health departments serve as the Department's representative in this reporting requirement. Furthermore, this Section provides that "Periodically the Department shall issue a list of diseases determined by it to be of public health significance... and shall furnish a copy of said list to the practitioners..."

Sarasota County Health Department - Disease Intervention Services  
 Mon - Fri, 8 am - 5 pm: 941-861-2873; Nights, weekends, holidays: 941-861-2900  
 Fax reports to: 941-861-2902  
**\*\* MAIL HIV/AIDS REPORTS (DO NOT FAX)**