



# Communicable Reportable Conditions

Effective: June 14, 2019

Confidential fax: 303-782-0338  
 STI/HIV confidential fax: 303-782-5393  
 Toll-free fax: 800-811-7263

Phone: 303-692-2700  
 Toll-free phone: 800-866-2759  
 Evening/weekend hours: 303-370-9395

[www.colorado.gov/cdphe/report-a-disease](http://www.colorado.gov/cdphe/report-a-disease)

- Disease Report Forms
- Specimen submission guidance
- Colorado Electronic Disease Reporting System (CEDRS) application

Complete Board of Health rules can be found at: <https://www.colorado.gov/pacific/cdphe/regulations-adopted-board-health>

**Immediate reporting by phone is required of any illness that may be caused by biological, chemical or radiologic terrorism.**

As indicated below, reporting by labs (diagnostic results and those highly correlated with disease) and providers (including suspected conditions) is required in accordance with Regulation 6 CCR 1009-1. In addition to reporting positive laboratory results to public health, clinical laboratories are required to submit isolates and/or clinical material to the CDPHE laboratory for select pathogens. For all other pathogens, isolate/clinical material submission may be requested.

Time	Reporter	Condition
4d	L	<i>Acinetobacter baumannii</i> , carbapenem-resistant (CRAB)*
4d	P	Acute flaccid myelitis
24h	P	Animal bites (by dogs, cats, rabies reservoir species & other wild carnivores)
4d	P	Animal bites (by any other mammals)
Imm	L&P	Anthrax*
4d	L	Arboviral Diseases (Eastern equine encephalitis, LaCrosse encephalitis virus, Japanese encephalitis virus, California encephalitis serogroup, St. Louis encephalitis virus, Western equine encephalitis virus, Powassan virus and others)
Imm	L&P	Botulism
4d	L&P	Brucellosis*
4d	L&P	Campylobacteriosis
Imm	L&P	<i>Candida auris</i> (identified or suspected, including <i>Candida haemulonii</i> )*
30d	L	Candidemia <sup>5-county</sup>
4d	L&P	Chancroid **
4d	L	Chikungunya
4d	L&P	Chlamydia **
Imm	L&P	Cholera*
4d	P	CJD & other transmissible spongiform encephalopathies (TSEs)
30d	L	<i>Clostridiodes difficile</i> ( <i>Clostridium difficile</i> ) <sup>5-county</sup>
4d	L	Colorado tick fever
4d	L&P	Cryptosporidiosis
4d	L&P	Cyclosporiasis
4d	L	Dengue
Imm	L&P	Diphtheria*
4d	P	Encephalitis
4d	L	Enterobacteriaceae, carbapenem-resistant (CRE)*
4d	L	Enterobacteriaceae, extended-spectrum beta-lactamase (ESBL) <sup>Boulder</sup>
4d	L&P	<i>Escherichia coli</i> O157:H7 / Shiga toxin-producing <i>Escherichia coli</i> *
4d	L&P	Giardiasis
4d	L&P	Gonorrhea, any site **
4d	L	Gram-negative bacteria, colistin-resistant*
4d	L	Group A streptococci* <sup>(+) 5-county</sup>
30d	L	Group B streptococci* <sup>(+) 5-county</sup>
1wd	L&P	<i>Haemophilus influenzae</i> * <sup>(+)</sup>
4d	L&P	Hantavirus disease
4d	P	Hemolytic uremic syndrome if < 18 years
1wd	L&P	Hepatitis A (IgM+)
4d	L&P	Hepatitis B
4d	L&P	Hepatitis C (positive serum antibody titer and/or +confirmatory assays)
4d	L	Hepatitis C (negative confirmatory assays)
4d	P	Hepatitis, other viral
4d	L&P	Human immunodeficiency virus (HIV) / acquired immunodeficiency syndrome (AIDS) ** • All reactive HIV tests • HIV viral load (any value) • CD4 counts (any value) • HIV genotype
4d	P	Influenza-associated death if <18 years

Time	Reporter	Condition
4d	L&P	Influenza-associated hospitalization
4d	L&P	Legionellosis
4d	P	Leprosy (Hansen's Disease)
4d	L&P	Listeriosis*
4d	L&P	Lyme disease
4d	L&P	Lymphogranuloma venereum (LGV) **
4d	L&P	Malaria
Imm	L&P	Measles (rubeola)
Imm	L&P	Meningococcal Disease ( <i>N. meningitidis</i> or gm-neg diplococci)* <sup>(+)</sup>
4d	L&P	Mumps
4d	L	<i>Mycobacterium</i> , nontuberculous (NTM) <sup>5-county</sup>
Imm	L&P	Outbreaks (incl foodborne, water, person-to-person, healthcare settings)
1wd	L&P	Pertussis (whooping cough)
Imm	L&P	Plague*
Imm	L&P	Poliomyelitis
4d	L	<i>Pseudomonas aeruginosa</i> , carbapenem-resistant
4d	L&P	Psittacosis
4d	L&P	Q fever ( <i>Coxiella burnetii</i> )
Imm	L&P	Rabies, human (suspected)
4d	L&P	Respiratory Syncytial Virus (RSV)-associated hospitalization <sup>5-county</sup>
4d	L&P	Rickettsiosis (including RMSF and typhus)
1wd	L&P	Rubella, acute infection
4d	L&P	Rubella, congenital
4d	L&P	Salmonellosis*
Imm	L&P	Severe or novel coronavirus (MERS-CoV or SARS-CoV)
4d	L&P	Shigellosis*
Imm	L&P	Smallpox (Variola virus or Orthopox virus)
4d	L	<i>Staphylococcus aureus</i> , Vancomycin-resistant/intermediate (VRSA/VISA)*
4d	P	Streptococcal toxic shock syndrome**
4d	L	<i>Streptococcus pneumoniae</i> ** <sup>(+)</sup>
1wd	L&P	Syphilis/ <i>Treponema pallidum</i> (all reactive tests) **
4d	P	Tetanus
4d	L&P	Tick-borne relapsing fever ( <i>Borrelia hermsii</i> )
4d	P	Toxic shock syndrome, non-streptococcal
4d	P	Trichinosis
1wd	L&P	Tuberculosis disease (active)*
4d	L	Tuberculosis infection (+IGRA) <sup>◇</sup>
1wd	L&P	Tularemia*
1wd	L&P	Typhoid fever*
4d	L&P	Varicella (chicken pox)
4d	L	Vibriosis*
Imm	L&P	Viral hemorrhagic fever*
4d	L	West Nile virus (acute infection, IgM+)
4d	L	Yellow fever
4d	L	Yersiniosis* <sup>7-county</sup>
4d	L	Zika virus

Send isolates/clinical material to: 8100 Lowry Blvd, Denver, CO 80230, Phone: 303-692-3090

All reports and specimens shall be accompanied by the following information:

- Name of disease or condition
- Patient's name
- Patient's date of birth, sex, race, ethnicity
- Patient's home address and phone
- Healthcare provider's name, address and phone number
- Laboratory information (test name, collection date, specimen type and accession number)

**Key:**  
 5-county = Adams, Arapahoe, Denver, Douglas and Jefferson  
 7-county = Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas and Jefferson  
 Boulder = Boulder county only  
 (+) = positive test from a normally sterile site  
 ◇ = Positive interferon gamma release assays (IGRAs) are only reportable by laboratories that use electronic reporting (ELR).  
 IMM = Immediately (by phone within 4 hours of suspected diagnosis)  
 24h = 24 hours  
 1wd = 1 working day | 4d = 4 calendar days | 30d = 30 calendar days  
 L = laboratory | P = provider | L&P = both  
 \*\* = Healthcare providers need to report sex at birth, gender identity, and relevant treatment.

\* Submission of isolate/clinical material required. Testing laboratories shall routinely submit bacterial culture isolates or patient clinical material that yields positive findings to the CDPHE Laboratory Services Division. The isolate or clinical material shall be received at the CDPHE Laboratory Services Division no later than one working day after the observation of positive findings. Clinical material is defined as: (i) A culture isolate containing the infectious organism for which submission of material is required, or (ii) If an isolate is not available, material containing the infectious organism for which submission of material is required, in the following order of preference: (A) a patient specimen; (B) nucleic acid; or (C) other laboratory material. For TB, only isolates should be submitted.

\*\* Isolate submission for 5-county area only.



# Environmental Reportable Conditions

Effective: January 14, 2018

Confidential fax: 303-782-0338  
Toll-free fax: 800-811-7263

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Toll-free phone: 800-866-2759

Evening/weekend hours: 303-370-9395

Immediate reporting by phone is required of any illness that may be caused by biological, chemical or radiologic terrorism.

As indicated below, reporting by health care providers, laboratories, coroners, hospitals and community clinics with emergency rooms is required in accordance with Regulation 6 CCR 1009-7.

Time	Reporter	Time	Reporter
7d	L&P Blood Lead Levels if ≤18 years (≥5 µg/dL)	90d	L&P Chromosomal abnormalities and neural tube defects diagnosed
30d	L&P Blood Lead Levels if ≤18 years (<5 µg/dL)		by prenatal testing or by genetic testing in Colorado residents
30d	L&P Blood Lead Levels if >18 years (≥5 µg/dL)		through the 3 <sup>rd</sup> birthday
30d	L&P Mercury (Blood, > 0.5 µg/dL)		
30d	L&P Mercury (Urine, > 20 µg/L)		
24h	L&P Any other disease, syndrome or condition that is known or suspected to be related to an exposure to a toxic substance, prescription drug, over-the-counter medication or remedy, controlled substance, environmental media or contaminated product that results in hospitalization, treatment in an emergency department, or death, and is:		
	a. Suspected of being a cluster, outbreak or epidemic,		
	b. A risk to the public due to ongoing exposure,		
	c. At an increased incidence beyond expectations,		
	d. Due to exposure to food, environmental media (including water, air, soil or sediment), or other material, such as marijuana products, that is contaminated by a toxic substance, hazardous substance, pollutant or contaminant,		
	e. A case of a newly-recognized or emerging disease or syndrome,		
	f. Related to a healthcare setting or contaminated medical devices or products, such as diverted drugs, or		
	g. May be caused by, or related to, a suspected intentional or unintentional release of chemical or radiological agents.		

**All reports and specimens shall be accompanied by the following information:**

- Name of disease or condition
- Patient's name
- Patient's date of birth, sex, race, ethnicity
- Patient's home address and phone
- Healthcare provider's name, address and phone number
- Any associated laboratory information (test name, collection date, specimen type and accession number)

**Key:**

24h = 24 hours  
7d = 7 calendar days  
30d = 30 calendar days  
90d = 90 calendar days

L = laboratory | P = provider | L&P = both