

Notifiable Diseases and Conditions DISTRICT OF COLUMBIA

To help prevent and control the spread of communicable diseases in the District of Columbia, healthcare providers, veterinarians, or other persons in charge of a communicable disease case are **required** by law to report certain diseases and conditions to the DC Department of Health (DOH) according to [Chapter 22-B2 of the District of Columbia Municipal Regulations](#). A case or suspected case of the following diseases must immediately be reported to DOH within the indicated timeframe. Please view our website for additional information: <https://doh.dc.gov/service/infectious-diseases>.

Emerging infectious diseases, an unusual occurrence of any disease, or an infection or outbreak (e.g. healthcare-associated, foodborne) that may be of public health concern must also be reported immediately by telephone to (202) 442-8141 during normal business hours (weekdays, 8:15am–4:45pm) and then by an online report as described in the section “Other Diseases and Conditions.” For immediate epidemiological support to address an urgent/emergent public health issue outside of business hours (weekdays, 8:15am–4:45pm), please call 1-(844)-493-2652.

Vaccine-Preventable	
What to Report	<ul style="list-style-type: none"> • Chickenpox (morbidity, pediatric mortality) – 48 h • Diphtheria – Immediate* • <i>Haemophilus influenzae</i>, invasive – 24 h • Hepatitis A – Immediate* • Measles (Rubeola) – Immediate* • Meningitis (<i>Neisseria meningitidis</i>) – Immediate* • Mumps – Immediate* <ul style="list-style-type: none"> • Pertussis (Whooping cough) – Immediate* • Poliovirus infection – Immediate* • Rubella, including congenital rubella syndrome – Immediate* • Streptococcal infection, invasive (Pneumococcal disease) – 24 h • Tetanus – 24 h • Vaccine adverse events – 48 h
Important Notes	* Must be reported immediately by telephone at (202) 442-9371 upon provisional diagnosis or the appearance of suspicious symptoms, and confirmed through an online report submitted using DCRC within 24 h.
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system Notifiable Disease and Condition Case Report Form http://doh.dc.gov/service/infectious-diseases
DOH Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI) 899 North Capitol Street NE, 6 th Floor, Washington, DC 20002 Tel (202) 442-9371 • Fax (202) 442-8060 • doh.epi@dc.gov

Human Immunodeficiency Virus (HIV)	
What to Report	<ul style="list-style-type: none"> • HIV infection – 48 h • Pregnancies in HIV–infected women – 48 h
How to Report	Mail, Fax Form available at https://doh.dc.gov/publication/hahsta-notifiable-disease-report-form
DOH Contact	HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA) 899 North Capitol Street NE, 4 th Floor, Washington, DC 20002 Tel (202) 671-4900 • Fax (202) 673-4367

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Hepatitis B and C*	
What to Report	<ul style="list-style-type: none"> • Hepatitis B – 48 h[‡] • Pregnancy in a woman positive for hepatitis B – 48 h[#] • Hepatitis C – 48 h • Pregnancy in a woman positive for hepatitis C – 48 h[#]
Important Notes	<p>*Hepatitis A is listed under Vaccine-Preventable diseases</p> <p>[‡]Acute hepatitis B is currently mandated. However, case reports for chronic and perinatal hepatitis B are requested and will be mandated in forthcoming regulations.</p> <p>[#]Requested, but not currently mandated. These conditions will be mandated in forthcoming regulations.</p>
How to Report	Fax Form available at https://doh.dc.gov/publication/hahsta-notifiable-disease-report-form
DOH Contact	HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA) 899 North Capitol Street NE, 4 th Floor, Washington, DC 20002 Tel (202) 671-4900 • Fax (202) 671-5094

Tuberculosis	
What to Report	• Tuberculosis – 48 h
How to Report	Fax Form available at https://doh.dc.gov/publication/tb-case-report-form
DOH Contact	HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA) 899 North Capitol Street NE, 4 th Floor, Washington, DC 20002 Tel (202) 698-4030 • Fax (202) 724-2363

Sexually Transmitted Diseases			
What to Report	<table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top; width: 50%;"> <ul style="list-style-type: none"> • Chancroid – 48 h • Chlamydia trachomatis infection (including PID*, perinatal, and trachoma) – 48 h • Gonococcal infection – 48 h • Granuloma inguinale (donovanosis) – 48 h </td> <td style="vertical-align: top; width: 50%;"> <ul style="list-style-type: none"> • Lymphogranuloma venereum (LGV, including atypical LGV) – 24 h • Syphilis (all stages and congenital) – 48 h • Urethritis, atypical – 48 h[#] </td> </tr> </table>	<ul style="list-style-type: none"> • Chancroid – 48 h • Chlamydia trachomatis infection (including PID*, perinatal, and trachoma) – 48 h • Gonococcal infection – 48 h • Granuloma inguinale (donovanosis) – 48 h 	<ul style="list-style-type: none"> • Lymphogranuloma venereum (LGV, including atypical LGV) – 24 h • Syphilis (all stages and congenital) – 48 h • Urethritis, atypical – 48 h[#]
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Important Notes	<p>*PID: Pelvic inflammatory disease</p> <p>[#]Urethritis, atypical, is clinical urethritis with negative nucleic acid amplification test for <i>Chlamydia trachomatis</i> and <i>Neisseria gonorrhoeae</i>. Possible etiologies include <i>M. genitalium</i>, <i>T. vaginalis</i> and <i>Ureaplasma</i> spp.</p>		
How to Report	Fax Form available at https://doh.dc.gov/publication/hahsta-notifiable-disease-report-form		
DOH Contact	HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA) 899 North Capitol Street NE, 4 th Floor, Washington, DC 20002 Tel (202) 671-4900 • Fax (202) 727-4934		

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Animal Bites			
What to Report	<ul style="list-style-type: none"> • A <i>person</i> bitten by an animal – Immediate 		
Important Notes	Human rabies should be reported as described under Other Diseases and Conditions		
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system Animal Bite Form https://doh.dc.gov/service/rabies-and-animal-exposures		
DOH Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI) 899 North Capitol Street, NE, 6 th Floor , Washington, DC 20002 Tel (202) 442-9143 • Fax (202) 442-8060 • Email: rabies.info@dc.gov		
What to Report	<ul style="list-style-type: none"> • An <i>animal</i> who bites a person or animal – Immediate • An <i>animal</i> bitten by another animal – Immediate • An <i>animal</i> suspected to have rabies – Immediate* 		
Important Notes	* Must be reported immediately by telephone (202) 442-4932 upon provisional diagnosis or the appearance of suspicious symptoms. A report should be submitted online using DCRC within 24 h.		
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system Animal Bite Form https://doh.dc.gov/service/rabies-and-animal-exposures		
DOH Contact	Animal Services Program and Animal Control 899 North Capitol Street, NE, Second Floor Washington, DC 20002 Tel (202) 567-6664 • Fax (202) 442-8117 • Email: rabies.info@dc.gov		
Healthcare–Associated Infections (HAI)			
What to Report	<table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top; width: 50%;"> <ul style="list-style-type: none"> • Central line–associated bloodstream infections (CLABSIs)# • Catheter–associated urinary tract infections (CAUTIs)# • Surgical site infections (SSI): <ul style="list-style-type: none"> ○ SSI: Abdominal hysterectomy# ○ SSI: Colon surgery# </td> <td style="vertical-align: top; width: 50%;"> <ul style="list-style-type: none"> • Methicillin–resistant Staphylococcus aureus (MRSA) bloodstream infections, LabID event# • <i>Clostridium difficile</i> (<i>C.difficile</i>), LabID event # • Carbapenem–resistant Enterobacteriaceae (CRE), LabID event # • Any infection considered of public health concern# • HAI outbreaks or clusters* </td> </tr> </table>	<ul style="list-style-type: none"> • Central line–associated bloodstream infections (CLABSIs)# • Catheter–associated urinary tract infections (CAUTIs)# • Surgical site infections (SSI): <ul style="list-style-type: none"> ○ SSI: Abdominal hysterectomy# ○ SSI: Colon surgery# 	<ul style="list-style-type: none"> • Methicillin–resistant Staphylococcus aureus (MRSA) bloodstream infections, LabID event# • <i>Clostridium difficile</i> (<i>C.difficile</i>), LabID event # • Carbapenem–resistant Enterobacteriaceae (CRE), LabID event # • Any infection considered of public health concern# • HAI outbreaks or clusters*
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Important Notes	* Must be reported immediately by telephone (202) 442–5842 upon provisional diagnosis or the appearance of suspicious symptoms, and confirmed through an online report submitted using DCRC within 24 h		
How to Report	# National Healthcare Safety Network https://www.cdc.gov/nhsn/ *Outbreaks and clusters should be reported using the DC Reporting and Surveillance Center (DCRC) online reporting system Notifiable Disease and Condition Case Report Form http://doh.dc.gov/service/infectious-diseases		
DOH Contact	Division of Epidemiology– Disease Surveillance and Investigation (DE–DSI) 899 North Capitol Street NE, 6 th Floor , Washington, DC 20002 Tel (202) 442-8141 • Fax (202) 442-8060 • Email doh.hai@dc.gov		

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Zika Virus Disease*	
What to Report	<ul style="list-style-type: none"> • Zika virus disease (including congenital Zika virus infection) – 24 h
Important Notes	* For more information about pregnant women and infants being followed as part of the Zika Pregnancy Registry, contact the Zika Pregnancy Registry Coordinator: Zika.registry@dc.gov
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system Zika Test Request and Reporting Form https://doh.dc.gov/page/providers-information-zika-virus-testing-district-columbia
DOH Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI) 899 North Capitol Street, NE, 6 th Floor , Washington, DC 20002 Tel (202) 442-9370 • Fax (202) 442-8060 • Email: Zika.registry@dc.gov

School/Child Care Facility–Associated Outbreaks*	
What to Report	<ul style="list-style-type: none"> • Conjunctivitis (Pink Eye) • Pinworm (Enterobiasis) • Gastrointestinal illness • Ringworm (Tinea) • Hand, foot, and mouth disease • Scabies • Head lice • Streptococcal non–invasive, Group A (Scarlet fever and strep throat) • Impetigo
Important Notes	*Required to be reported within 24 h by school/child care facilities only when there are ≥ 3 cases that occur in the facility within a 7–day period
How to Report	DC Reporting and Surveillance Center (DCRC) online reporting system Notifiable Disease and Condition Case Report Form https://doh.dc.gov/node/115022
DOH Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI) 899 North Capitol Street, NE, 6 th Floor , Washington, DC 20002 Tel (202) 442-5893 • Fax (202) 442-8060 • Email: schoolhealth.epi@dc.gov

Blood Lead Levels (in children <6 years old)*	
What to Report	<ul style="list-style-type: none"> • Providers must report a lead poisoned child to DOEE by telephone within 72 h of receiving notification from a laboratory or another provider/facility. • Laboratories, including providers who utilize point–of–care (POC) testing, are required by law to report all test results below 10 µg/dL within one week of analysis. • For test results of 10 µg/dL and higher, laboratories and providers who utilize point–of–care testing are required by law to report the result to DOEE immediately. As a professional courtesy, we request that all results ≥ 5 µg/dL be reported immediately as well.
Important Notes	*Reported to DC Department of Energy & Environment (DOEE), not DC DOH
How to Report	Phone or Fax Providers utilizing POC testing to report non–elevated results may also report by email
DOEE Contact	DC Department of Energy & Environment (DOEE) Lead and Healthy Housing Division 1200 First Street NE, 5th Floor, Washington, DC 20002 Tel (202) 654-6002 • Fax (202) 535-2607 • Email: lead.screen@dc.gov

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Other Diseases and Conditions	
What to Report	<ul style="list-style-type: none"> • Emerging infectious diseases – Immediate* • An unusual occurrence of any disease – Immediate* • An infection or outbreak that may be of public health concern – Immediate* <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <ul style="list-style-type: none"> • Anthrax – Immediate* • Babesiosis – 48 h • Botulism – Immediate* • Brucellosis – 24 h • Campylobacteriosis – 24 h • Chikungunya – 24 h • Cholera (Toxigenic <i>Vibrio cholerae</i> 01 or 0139) – Immediate* • Coccidioidomycosis – 48 h • Cryptosporidiosis – 48 h • Cyclosporiasis – 48 h • Dengue – 24 h • Ehrlichiosis – 48 h • Encephalitis, acute arboviral (e.g. Eastern Equine Encephalitis, St. Louis Encephalitis, Western Equine Encephalitis) – Immediate* • Giardiasis – 48 h • Hantavirus pulmonary syndrome (HPS) – Immediate* • Hemolytic uremic syndrome – Immediate* • Hepatitis A – Immediate* • Influenza A, novel – Immediate* • Influenza-associated mortality (patients less than 18 years of age) – Immediate* • Kawasaki disease – 48 h • Legionellosis – 48 h • Leptospirosis – 48 h • Listeriosis – Immediate* • Lyme Disease – 48 h • Malaria – 48 h • Melioidosis – 48 h • Meningitis, (aseptic or viral, fungal, and bacterial (other than <i>N. meningitidis</i>) – 24 h </div> <div style="width: 48%;"> <ul style="list-style-type: none"> • Meningococcal disease, invasive – Immediate* • Middle East Respiratory Syndrome (MERS) – Immediate* • Plague (<i>Yersinia pestis</i>) – Immediate* • Powassan virus – 48 h • Psittacosis – 24 h • Q Fever – 24 h • Rabies (human) – Immediate* • Rickettsiosis, spotted fever (e.g. Rocky Mountain Spotted Fever) – 48 h • Salmonellosis – 48 h • Severe Acute Respiratory Syndrome (SARS) – Immediate* • Shiga toxin-producing Escherichia coli (STEC) – Immediate • Shigellosis – 48 h • Smallpox – Immediate* • Staphylococcal infections in newborns (nosocomial) – Immediate • Toxic shock syndrome (Staphylococcal, Streptococcal, and other) – 48 h • Trichinosis (Trichinellosis) – 48 h • Tularemia – Immediate* • Typhoid fever (<i>Salmonella typhi</i>) – Immediate* • Vibriosis (non-cholera <i>Vibrio</i> species infections) – Immediate • Viral hemorrhagic fevers (Ebola or other) – Immediate* • West Nile virus – 48 h • Yellow fever – Immediate* • Zika virus disease (including congenital Zika virus infection) – 24 h </div> </div>
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DOH Contact	Division of Epidemiology–Disease Surveillance and Investigation (DE–DSI) 899 North Capitol Street, NE, 6 th Floor, Washington, DC 20002 Tel (202) 442-9371 • Fax (202) 442-8060 • Email: doh.epi@dc.gov