Local Health Agency Reporting Requirements

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0	Amebiasis	₽→	Giardiasis	//→ *	Rabies in a human
□ →	Anaplasmosis	!→*	Glanders	!→	Relapsing fever (borreliosis)
/ →*	Anthrax		Gonorrhea	0	Respiratory disease
₽→	Arboviral infection	!→	Haemophilus influenzae, invasive disease	!→*	Rubella (German measles)
₽→	Babesiosis	₽→	Hansen's disease (Leprosy)	//→ *	Rubella syndrome, congenital
□ →	Basidiobolomycosis	!→	Hantavirus infection	!→	Salmonellosis
₽→	Blastomycosis	!→	Hemolytic uremic syndrome	!→	Severe acute respiratory syndrome (SARS)
⊬ →*	Botulism	!→	Hepatitis A	!→	Shigellosis
□→ *	Brucellosis	₽→	Hepatitis B and Hepatitis D	//→ *	Smallpox
₽→	Campylobacteriosis		Hepatitis C	!→	Spotted fever rickettsiosis (e.g., Rocky Mountain spotted fever)
!→*	Candida auris	₽→	Hepatitis E		Streptococcal group A infection, invasive disease
□→ *	Carbapenem-resistant Acinetobacter baumannii (CRAB)	₽→	HIV infection and related disease		Streptococcal group B infection in an infant younger than 90 days of age, invasive disease
□→ *	Carbapenem-resistant Enterobacterales (CRE)	!→	Influenza-associated mortality in a child		Streptococcus pneumoniae infection, (pneumococcal invasive disease)
□→ *	Carbapenem-resistant Pseudomonas aeruginosa (CRPA)	!→	Legionellosis (Legionnaires' disease)	₽→	Syphilis
⊒→	Chagas infection and related disease (American Trypanosomiasis)	!→	Leptospirosis	₽→	Taeniasis
₽→	Chancroid (Haemophilus ducreyi)	!→*	Listeriosis	⊒→	Tetanus
₽→	Chikungunya	⊒→	Lyme disease	⊒→	Toxic shock syndrome
	Chlamydia trachomatis infection	!→	Lymphocytic choriomeningitis	!→	Trichinosis
!→	Cholera	⊒→	Malaria	!→*	Tuberculosis, active disease
	Coccidioidomycosis (Valley Fever)	/ →*	Measles (rubeola)	!→	Tuberculosis latent infection in a child five years of age or younger
₽→	Colorado tick fever	!→*	Melioidosis	/ →*	Tularemia
₽→	Creutzfeldt-Jakob disease	/ →*	Meningococcal invasive disease	!→	Typhoid fever
u	Cronobacter infection in an infant	!→	Middle East respiratory syndrome (MERS)	!→	Typhus fever
₽→	Cryptosporidiosis	₽→	Mpox	!→	Vaccinia-related adverse event
⊒→	Cyclospora infection	!→*	Mumps	!→*	Vancomycin-resistant or Vancomycin-intermediate Staphylococcus aureus
₽→	Cysticercosis		Mycoplasma genitalium infection	$\square \rightarrow 1$	Varicella (chickenpox)
!→	Dengue	$ \swarrow $	Novel coronavirus infection	!→	Vibrio infection
u	Diphtheria	×	Novel influenza virus infection	//→ *	Viral hemorrhagic fever
□ →	Ehrlichiosis	!→	Pertussis (whooping cough)	₽→	West Nile virus infection
u	Emerging or exotic disease	/ →*	Plague	/ →*	Yellow fever
u	Encephalitis, parasitic	/ →*	Poliomyelitis (paralytic or non-paralytic)	!→*	Yersiniosis (enteropathogenic Yersinia)
!→	Encephalitis, viral	₽→	Psittacosis (ornithosis)	!→*	Zika virus infection
!→	Escherichia coli, Shiga toxin-producing	!→	Q Fever		

Key:

- ✓ Notify the Department within 24 hours after receiving a report under R9-6-202 or R9-6-203.
- ! Notify the Department within one working day after receiving a report under R9-6-202 or R9-6-203.
- Notify the Department within five working days after receiving a report under R9-6-202 or R9-6-203.
- O Notify the Department within 24 hours after receiving a report or reports indicating an outbreak or possible outbreak.
- → Submit an epidemiologic investigation report within 30 calendar days after receiving a report under R9-6-202 or R9-6-203 or notification by the Department.
- * In consultation with the Department, ensure that an isolate of the organism for each positive culture, if available, or a specimen for each positive test result is submitted to the Arizona State Laboratory within one working day.
- Submit an epidemiologic investigation report only if a case or suspect case has died as a result of the communicable disease.



Local Health Agency Reporting Requirements

Adapted from Arizona Administrative Code R9-6-206.

A local health agency shall provide to the Department the information contained in each report of a case, suspect case, or occurrence received by the local health agency under R9-6-202 or R9-6-203, including any report of disease in a nonresident of the jurisdiction who is or has been diagnosed or treated in the jurisdiction and shall specify:

- 1. Whether the individual identified in each report:
 - a. **meets the case definition** for a case of the specific disease,
 - b. is a **suspect case**,
 - c. **does not meet the case definition** for a case or suspect case of the specific disease, or
 - d. the status of the disease has not yet been determined; and
- 2. The **status of the epidemiologic investigation** for each report.

Except as specified in the table, and if required under Article 3, a local health agency shall submit to the Department a report of an **epidemiologic investigation** conducted by the local health agency:

- In response to a report of a case, suspect case, or occurrence submitted under R9-6-202 or R9-6-203, or about which the local health agency was notified by the Department;
- 2. Within 30 calendar days after receiving the report;
- 3. Including in the report of the epidemiologic investigation:
 - a. The information described in R9-6-203(B) or R9-6-202(C);
 - b. A description of **all laboratory or other test results**, performed in addition to the laboratory tests described in R9-6-202(C) and contributing to the diagnosis;
 - c. A description of the **case's symptoms** of the disease and other signs that may be observed that indicate that the individual may have the disease, if applicable;
 - d. A **classification** of the case according to the case definition;
 - e. A **description of the condition or status** of the case at the end of the epidemiologic investigation;
 - f. A description of the case's specific **risk factors** for acquiring the disease or other epidemiologic evidence of how the case acquired the infection that resulted in the disease;
 - g. A description of how the local health agency provided or arranged for the case to receive **health education** about the nature of the disease and how to prevent transmission or limit disease progression;
 - A description of the case's specific risk factors for transmitting the disease considered by the local health agency when conducting an assessment of contacts;
 - i. A description of the **control measures** used by the local health agency to reduce the spread of the disease; and
 - j. The date the report of the case, suspect case, or occurrence was submitted.

For each instance when the local health agency receives a report or reports indicating an **outbreak** or possible outbreak, the local health agency shall:

- 1. **Within 24 hours** after receiving the report or reports, provide to the Department the following information:
 - a. The **location** of the outbreak or possible outbreak;
 - b. If known, the **number of cases and suspect cases**;
 - c. The **date that the outbreak was reported** or the dates that cases suggestive of an outbreak were reported;
 - d. The **setting** of the outbreak or possible outbreak;
 - The name of the disease suspected or known to be the cause of the outbreak or possible outbreak; and
 - f. The name and telephone number of the local health agency point of contact regarding the outbreak or possible outbreak; and
- 2. Within 30 calendar days after receiving the last report or reports associated with the outbreak, submit to the Department a report of the epidemiologic investigation conducted by the local health agency in response to the outbreak or possible outbreak, including:
 - A description of the outbreak location and setting;
 - b. The **date** that the local health agency was notified of the outbreak;
 - c. A description of how the local health agency **verified the outbreak**;
 - d. The **number of individuals reported to be ill** during the outbreak;
 - The number of individuals estimated to be at risk for illness as a result of the outbreak;
 - f. The specific **case definition** used;
 - g. A summary profile of the signs and symptoms;
 - h. An **epidemiologic curve**;
 - A copy of the laboratory evidence collected, including all laboratory test results, for all specimens submitted for testing to a laboratory other than the Arizona State Laboratory;
 - j. **Hypotheses** of how the outbreak occurred;
 - A description of the control measures used and the dates the control measures were implemented;
 - The conclusions drawn based upon the results of the epidemiologic investigation;
 - m. **Recommendations for preventing** future outbreaks; and
 - The name, address, and telephone number of the individual making the report to the Department.

The Department-provided format for report of cases is MEDSIS, with the following exceptions: sexually-transmitted infections, including HIV. MEDSIS may also be used to submit epidemiological reports of cases and outbreaks.

More communicable disease reporting information is available at www.azdhs.gov/reporting.