



Communicable Reportable Conditions

Effective: July 15, 2018

Confidential Fax: 303-782-0338
STI/HIV Confidential Fax: 303-782-5393
Toll Free Fax: 1-800-811-7263

Phone: 303-692-2700
Toll Free Phone: 1-800-866-2759
Evening/weekend hours: 303-370-9395

www.colorado.gov/cdphe/report-a-disease
 • Disease Report Forms • Colorado Electronic Disease Reporting
 • Specimen submission guidance • 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.

Imm = Immediately † | 1wd = 1 working day ‡
24h = 24 hours | 4d = 4 days | 30d = 30 days
L = laboratory | P = provider | L&P = both

Time	Reporter	Time	Reporter
30d	L <i>Acinetobacter baumannii</i> , carbapenem-resistant (CRAB) ⁽⁺⁺⁾ 5-county	4d	P Influenza-associated hospitalization
4d	P Acute flaccid myelitis	4d	L&P Legionellosis
24h	P Animal bites (by dogs, cats, rabies reservoir species & other wild carnivores)	4d	P Leprosy (Hansen's Disease)
4d	P Animal bites (by any other mammals)	4d	L&P Listeriosis*
Imm	L&P Anthrax*	4d	L&P Lyme disease
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)	4d	L&P Lymphogranuloma venereum (LGV) ‡
Imm	L&P Botulism	4d	L&P Malaria
4d	L&P Brucellosis*	Imm	L&P Measles (rubeola)
4d	L&P Campylobacteriosis	Imm	L&P Meningococcal Disease (<i>N. meningitidis</i> or gm-neg diplococci)* (+)
Imm	L&P <i>Candida auris</i> (identified or suspected, including <i>Candida haemulonii</i>)*	4d	L&P Mumps
30d	L Candidemia ^{5-county}	Imm	L&P Outbreaks: incl foodborne, water, person-to-person, healthcare settings
4d	L&P Chancroid ‡	1wd	L&P Pertussis (whooping cough)
4d	L Chikungunya	Imm	L&P Plague*
4d	L&P Chlamydia ‡	Imm	L&P Poliomyelitis
Imm	L&P Cholera*	4d	L <i>Pseudomonas aeruginosa</i> , carbapenem-resistant
4d	P CJD & other transmissible spongiform encephalopathies (TSEs)	4d	L&P Psittacosis
30d	L <i>Clostridium difficile</i> ^{5-county}	4d	L&P Q fever (<i>Coxiella burnetii</i>)
4d	L Colorado tick fever	Imm	L&P Rabies, human (suspected)
4d	L&P Cryptosporidiosis	4d	L&P Rickettsiosis (including RMSF and typhus)
4d	L&P Cyclosporiasis	1wd	L&P Rubella (acute infection)
4d	L Dengue	4d	L&P Rubella, congenital
Imm	L&P Diphtheria*	4d	L&P Salmonellosis*
4d	P Encephalitis	Imm	L&P Severe or novel coronavirus (MERS-CoV or SARS-CoV)
4d	L Enterobacteriaceae, carbapenem-resistant (CRE)	4d	L&P Shigellosis*
4d	L Enterobacteriaceae, extended-spectrum beta-lactamase (ESBL) ^{Boulder}	Imm	L&P Smallpox (Variola virus or Orthopox virus)
4d	L&P <i>Escherichia coli</i> O157:H7 / Shiga toxin-producing <i>Escherichia coli</i> *	4d	L <i>Staphylococcus aureus</i> , Vancomycin-resistant*
4d	L&P Giardiasis	4d	P Streptococcal toxic shock syndrome**
4d	L&P Gonorrhea, any site ‡	4d	L <i>Streptococcus pneumoniae</i> ** (+)
4d	L Group A streptococci* (+) 5-county	1wd	L&P Syphilis/ <i>Treponema pallidum</i> (all reactive tests) ‡
30d	L Group B streptococci* (+) 5-county	4d	P Tetanus
1wd	L&P <i>Haemophilus influenzae</i> * (+)	4d	L&P Tick-borne relapsing fever
4d	L&P Hantavirus disease	4d	P Toxic shock syndrome (non-streptococcal)
4d	P Hemolytic uremic syndrome if < 18 years	4d	P Trichinosis
1wd	L&P Hepatitis A	1wd	L&P Tuberculosis disease (active)*
4d	L&P Hepatitis B	1wd	L&P Tularemia*
4d	L&P Hepatitis C	1wd	L&P Typhoid fever*
4d	P Hepatitis, other viral	4d	L&P Varicella (chicken pox)
4d	L&P Human immunodeficiency virus (HIV) / acquired immunodeficiency syndrome (AIDS) ‡	4d	L Vibriosis*
	• All reactive HIV tests • HIV viral load (any value)	Imm	L&P Viral hemorrhagic fever*
	• CD4 counts (any value) • HIV genotype	4d	L West Nile virus (acute infection, IgM+)
4d	P Influenza-associated death if < 18 years	4d	L Yellow fever
		4d	L Yersiniosis* 7-county
		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
- Physician's name, address and phone
- 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
(+) = positive test from a normally sterile site / (++) = positive culture from sterile site or urine

† = "Immediate" = by phone, within 4 hours of suspected diagnosis
‡ = Unless the term "working day" is specified, "days" refers to calendar days.
* = Physicians need to report sex at birth, gender identity, and relevant treatment.
Boulder = Boulder county only

*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.



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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.

24h = 24 hours | 7d = 7 days
30d = 30 days | 90d = 90 days
L&P = Laboratory and Provider

Time	Reporter	Condition
7d	L&P	Blood Lead Levels if ≤18 years (≥5 µg/dL)
30d	L&P	Blood Lead Levels if ≤18 years (<5 µg/dL)
30d	L&P	Blood Lead Levels if >18 years (≥5 µg/dL)
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: <ol style="list-style-type: none"> Suspected of being a cluster, outbreak or epidemic, A risk to the public due to ongoing exposure, At an increased incidence beyond expectations, 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, A case of a newly-recognized or emerging disease or syndrome, Related to a healthcare setting or contaminated medical devices or products, such as diverted drugs, or May be caused by, or related to, a suspected intentional or unintentional release of chemical or radiological agents.

Time	Reporter	Condition
90d	L&P	Chromosomal abnormalities and neural tube defects diagnosed by prenatal testing or by genetic testing in Colorado residents through the 3 rd birthday

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

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