

Class B (2)		
Creutzfeldt-Jakob disease (CJD)	Hepatitis D	Streptococcal disease, group A, invasive (IGAS)
Cytomegalovirus (CMV)	Hepatitis E	Streptococcal disease, group B, in newborn
Ehrlichiosis/Anaplasmosis	Herpes (congenital)	Streptococcal toxic shock syndrome (STSS)
Influenza-associated hospitalization	Vibriosis	Streptococcus pneumoniae, invasive disease (ISP)
Leprosy (Hansen disease)	Yersiniosis	Toxic Shock Syndrome (TSS)
Mycobacterial disease, other than tuberculosis (MOTT)	Rocky Mountain spotted fever (RMSF)	
Class C		
Outbreaks: Community, Foodborne, Healthcare-associated, Institutional, Waterborne, Zoonotic		

Source: Ohio Department of Health

Please visit:

[www.odh.ohio.gov/healthResources/infectiousDiseaseManual.aspx](http://www.odh.ohio.gov/healthResources/infectiousDiseaseManual.aspx)

## HOW DO I REPORT A DISEASE?

Contact Central Reporting at:

Phone: (216) 201-2080

Fax: (216) 676-1316



**Public Health**  
Prevent. Promote. Protect.

## THE CITY OF CLEVELAND MISSION STATEMENT

We are committed to improving the quality of life in the City of Cleveland by strengthening our citizens and making Cleveland a desirable, safe city in which to live, work, raise a family, shop, study, play and grow.

For additional information please contact:

### Office of Communicable Disease Surveillance & Epidemiology

Main: (216) 664-EPIS (3747)

After Hours: (216) 857-7473

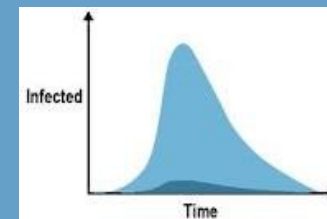
Office Hours: Monday-Friday, 8am-5pm

Website:

[www.clevelandhealth.org](http://www.clevelandhealth.org)

## OFFICE OF COMMUNICABLE DISEASE SURVEILLANCE & EPIDEMIOLOGY

### SURVEILLANCE



### OUTBREAK RESPONSE

### HEALTH EDUCATION



### PREPAREDNESS PLANNING

### OCDE MISSION STATEMENT:

To provide disease surveillance, data collection, data analysis, health education, preparedness planning, outbreak response, and disease prevention services designed to protect the health of Clevelanders.



## WHAT IS DISEASE REPORTING?

This is when physicians, hospitals, infection control professionals, laboratorians, and individuals report diseases of public health concern (communicable/infectious diseases) to the local public health department. The Ohio Administrative Code (3701-3-02 & 3701-3-03) mandates disease reporting to the local health department where the case resides.

## WHAT ARE REPORTABLE DISEASES?

Infectious and communicable diseases caused by: Bacteria, Viruses, Fungi, Parasites, Toxins

## WHY MUST A REPORT BE MADE?

- To prevent the spread of communicable disease
- To protect the health of the public
- To determine the level of illness in the community
- To evaluate risk of disease transmissions
- To intervene immediately and control the spread of disease
- To facilitate surveillance, prevention, and outbreak control

## WHEN MUST THE REPORT BE MADE?

**Class A:** report immediately by phone upon recognition that a case, suspected case, or positive lab result exists

**Class B (1):** report by the end of the next business day after the existence of a case, a suspected case or a positive lab test is known

**Class B (2):** report by the end of the work week after the existence of a case, a suspected case or a positive lab test is known

**Class C:** report an outbreak, unusual incidence, or epidemic by the end of the next business day

## The ABCs of Disease Reporting KNOW YOUR OHIO ABCs QUICK GUIDE

Class A		
Anthrax	Measles	Tularemia
Botulism, foodborne	Rabies-Human	Meningococcal disease
Cholera	Rubella (not congenital)	Viral Hemorrhagic fever (VHF)
Diphtheria	Severe Acute respiratory Syndrome (SARS)	Yellow Fever
Influenza A – novel virus	Smallpox	Plague
Class B (1)		
Arboviral neuroinvasive and non-neuroinvasive disease	Granuloma Inguinale	Pertussis
Eastern Equine encephalitis virus disease	<i>Haemophilus influenzae</i> (invasive disease)	Poliomyelitis (including vaccine-associated cases)
LaCrosse virus disease (other California serogroup virus disease)	Meningitis, bacterial	Psittacosis
Powassan virus disease	Hantavirus	Q fever
St. Louis encephalitis virus disease	Hemolytic uremia syndrome (HUS)	Rubella (congenital)
West Nile virus infection	Hepatitis A	Salmonellosis
Western equine encephalitis virus disease	Hepatitis B, perinatal	Shigellosis

Other arthropod-borne disease	Influenza-associated pediatric mortality	Staphylococcus aureus, with resistance or intermediate resistance to vancomycin (VRSA, VISA)
Chancroid	Legionnaires' Disease	Syphilis
Cyclosporiasis	Listeriosis	Tetanus
Coccidioidomycosis	Mumps	Tuberculosis, including MDR
Dengue	Malaria	Typhoid Fever
<i>E. coli</i> O157:H7 and other enterohemorrhagic (shiga toxin-producing) <i>E. coli</i>	Meningitis, aseptic (viral)	
Class B (2)		
Amebiasis	Giardiasis	Herpes (congenital)
Botulism, wound	Cryptosporidiosis	Leptospirosis
Botulism, infant	Lyme disease	Trichinosis
Brucellosis	Vibriosis	Typhus fever
Campylobacteriosis	Hepatitis B, non-perinatal	Varicella
Chlamydia infections: urethritis, epididymitis, Cervicitis, pelvic inflammatory disease (PID), pharyngitis, arthritis, endocarditis, meningitis and neonatal conjunctivitis and pneumonia	Hepatitis C	Gonococcal infections (urethritis, cervicitis, PID, pharyngitis, arthritis, endocarditis, meningitis and neonatal conjunctivitis)