

“Know Your ABCs”: a Quick Guide to Reportable Infectious Diseases in Ohio
Ohio Administrative Code 3701-3-02. Effective January 1, 2006.

Class A Diseases

(1) diseases of major public health concern because of the severity of disease or potential for epidemic spread - report by telephone immediately upon recognition that a case, suspect case or positive laboratory result exists

Anthrax	Measles	Rubella (not congenital)	Tularemia
Botulism, foodborne	Meningococcal disease	Severe acute respiratory syndrome (SARS)	Viral hemorrhagic fever (VHF)
Cholera	Plague	Smallpox	Yellow fever
Diphtheria	Rabies, human		

Any unexpected pattern of cases, suspected cases, deaths or increased incidence of any other disease of major public health concern, because of the severity of disease or potential for epidemic spread, which may indicate a newly recognized infectious agent, outbreak, epidemic, related public health hazard or act of bioterrorism.

(2) diseases of public health concern needing timely response because of potential for epidemic spread - report by the end of the next business day after the existence of a case, suspect case or positive laboratory result is known

Arboviral neuroinvasive and non-neuroinvasive disease	Chancroid	Influenza-associated pediatric mortality	Rubella (congenital)
Eastern equine encephalitis virus disease	Coccidioidomycosis	Legionnaires' disease	Salmonellosis
LaCrosse virus disease (other California serogroup virus disease)	Dengue	Listeriosis	Shigellosis
Powassan virus disease	<i>E. coli</i> O157:H7 and other enterohemorrhagic (Shiga toxin-producing) <i>E. coli</i>	Lymphogranuloma venereum	<i>Staphylococcus aureus</i> , with resistance or intermediate resistance to vancomycin (VRSA, VISA)
St. Louis encephalitis virus disease	Foodborne disease outbreaks	Malaria	Syphilis
West Nile virus disease (also current infection)	Granuloma inguinale	Meningitis, aseptic, including viral meningoencephalitis	Tetanus
Western equine encephalitis virus disease	<i>Haemophilus influenzae</i> (invasive disease)	Mumps	Tuberculosis (TB), including multi-drug resistant tuberculosis (MDR-TB)
Other arthropod-borne disease	Hantavirus	Pertussis	Typhoid fever
	Hemolytic uremic syndrome (HUS)	Poliomyelitis (including vaccine-associated cases)	Waterborne disease outbreaks
	Hepatitis A	Psittacosis	
	Hepatitis B, perinatal	Q fever	

(3) diseases of significant public health concern -- report by the close of the working week after the existence of a case, suspect case or positive laboratory result is known

Amebiasis	Encephalitis, other viral	Kawasaki disease (mucocutaneous lymph node syndrome)	Streptococcal disease, group B, in newborn
Botulism, wound	Encephalitis, post-infection	Leprosy (Hansen disease)	Streptococcal toxic shock syndrome (STSS)
Botulism, infant	Giardiasis	Leptospirosis	<i>Streptococcus pneumoniae</i> , invasive disease (ISP)
Bruceellosis	Gonococcal infections (urethritis, cervicitis, pelvic inflammatory disease, pharyngitis, arthritis, endocarditis, meningitis and neonatal conjunctivitis)	Lyme disease	Toxic shock syndrome (TSS)
Campylobacteriosis		Meningitis, including other bacterial	Toxoplasmosis (congenital)
Chlamydia infections (urethritis, epididymitis, cervicitis, pelvic inflammatory disease, neonatal conjunctivitis and pneumonia)		Mycobacterial disease, other than tuberculosis (MOTT)	Trichinosis
Creutzfeldt-Jakob disease (CJD)	Hepatitis B	Rheumatic fever	Typhus fever
Cryptosporidiosis	Hepatitis C	Rocky Mountain spotted fever (RMSF)	Varicella
Cytomegalovirus (CMV) (congenital)	Hepatitis D (delta hepatitis)	Streptococcal disease, group A, invasive (IGAS)	Vibriosis
Ehrlichiosis	Hepatitis E		Yersiniosis
	Herpes (congenital)		

Class B Disease - report the number of cases by the close of each working week
Influenza

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

Blastomycosis	Scabies	Outbreak, unusual incidence, or epidemic of other infectious diseases of known etiology not categorized as Class A, Class B or Class C
Conjunctivitis, acute	Sporotrichosis	
Histoplasmosis	Staphylococcal skin infections	
Nosocomial infections of any type	Toxoplasmosis	
Pediculosis		

Except as otherwise required for the Class A(1) diseases, reports of cases, suspect cases and positive laboratory results shall be in writing, and shall include the name and address of the case, suspect case, or person from whom the specimen was taken. A Board of Health may accept verbal reports by telephone or other electronic systems approved by the Director within the same time limitations. Reports shall include supplementary information relevant to the case or laboratory reports as needed to complete official surveillance forms provided or approved by the Director.

Cases of AIDS (acquired immune deficiency syndrome), AIDS-related conditions, HIV (human immunodeficiency virus) infection, perinatal exposure to HIV, and CD4 T-lymphocytes counts <200 or 14% must be reported on forms and in a manner prescribed by the Director.