To report a case, please contact:

Colorado Department of Public Health & Environment

4300 Cherry Creek Drive South Denver, CO 80246

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 Resources:

www.colorado.gov/cdphe/report-a-disease

Effective: November 14, 2015

- . Disease Report Forms
- Colorado Electronic Disease Reporting System (CEDRS) application
- · Specimen submission guidance

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.

Time Reporter	Time Reporter 24h = 24 hours   7d = 7 days   30d = 30 days
30d L Acinetobacter baumannii, carbapenem-resistant (CRAB)(+) 5-cou	nty 7d L/P Listeriosis* L = laboratory   P = provider   L/P = both
7d P Acute flaccid myelitis	7d L/P Lyme disease
7d L/P AIDS / HIV (Human immunodeficiency virus)*	7d Lymphogranuloma venereum (LGV)
24h P Animal bites by rabies reservoir species	7d L/P Malaria
7d P Animal bites by any other mammals	24h L/P Measles (rubeola)
24h L/P Anthrax*	[24h] [I/P] Meningococcal Disease (N. meningitidis or gm-neg diplococci)*(+)
24h L/P Botulism	7d L/P Mumps
7d L/P Brucellosis*	P Outbreaks: including foodborne, water, person-person,
7d L/P Campylobacteriosis	healthcare setting
7d L CD4 count (all)	24h LP Pertussis (whooping cough)
7d L/P Chancroid	24h L/P Plague*
7d L Chikungunya	24h L/P Poliomyelitis
7d L/P Chlamydia	7d L Powassan virus disease
24h L/P Cholera*	7d L Pseudomonas aeruginosa, carbapenem-resistant
7d P CJD and other transmissible spongiform encephalopathies	7d L/P Psittacosis
(TSEs)	7d L/P Q fever ( <i>Coxiella burnetii</i> )
30d L Clostridium difficile 5-county	24h LP Rabies, human (suspected)
☐ Colorado tick fever	[24h] L/P Rubella (acute infection)
7d L/P Cryptosporidiosis	Td L/P Rubella, congenital
7d L/P Cyclosporiasis*	7d L/P Salmonellosis*
7d L Dengue	24h L/P Severe or novel coronavirus
24h L/P Diphtheria*	7d L/P Shigellosis*
7d L Eastern equine encephalitis	24h LP Smallpox (Variola virus or Orthopox virus)
7d P Encephalitis	[7d] LIP Spotted fever rickettsiosis (including RMSF and typhus)
Td L Enterobacteriaceae, carbapenem-resistant (CRE)	7d L St. Louis encephalitis
Td LP Escherichia coli O157:H7 / Shiga toxin-producing	Td L Staphylococcus aureus, Vancomycin-resistant*
Escherichia coli*	Td P Streptococcal toxic shock syndrome*
[7d] L/P Giardiasis	☐ Streptococcus pneumoniae*
7d L/P Gonorrhea, any site	Syphilis (1°, 2°, or early latent)
Group A streptococci* (+) 5-county	7d P Tetanus
Group B streptococci* (*) 5-county	Td LP Tick-borne relapsing fever
24h LIP Haemophilus influenzae* (+)	Toxic shock syndrome (non-streptococcal)
7d L/P Hantavirus disease	7d P Trichinosis
P Hemolytic uremic syndrome if ≤ 18 years	[24h] L/P Tuberculosis disease (active)*
Lip Hepatitis A	24h L/P Tularemia*
7d LP Hepatitis B	24h L/P Typhoid fever*
7d LP Hepatitis C	7d LP Varicella (chicken pox)
P Hepatitis, other viral	7d L Vibriosis*
P Influenza-associated death if <18 years	24h □ Viral hemorrhagic fever*
P Influenza-associated hospitalization	7d L West Nile virus (acute infection, IgM+)
Japanese encephalitis	Western equine encephalitis
LaCrosse virus and other California serogroup viruses	7d L Yellow fever
[74] Legionellosis	7d L Yersiniosis* 7-county
P Leprosy (Hansen's Disease)	
	reports and specimens shall be accompanied by the following information:
	lame of disease or condition
Denver, CO 60730	latient's name
	atient's date of birth, sex, race, ethnicity atient's home address and phone
. F	hysician's name, address and phone
	aboratory information (test name, collection date, specimen type and accession number)
Key:	positive culture from a normally sterile site
,,	cluding, but not limited to, any undetectable HIV viral load and HIV genotype testing.
	cterial culture isolates or patient clinical material that yields positive findings to the CDPHE Laboratory
Services Division. 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.