

**Table 1**

By statute (10 NYCRR 2.10A), effective 08/2000, the following must be reported to the DCDOH within 24 hours. Diseases in bold must immediately be reported by telephone or fax and followed by submission of Form **DOH-389**.

Amebiasis	HIV	Salmonellosis
Animal bites for which rabies prophylaxis is given*	Legionellosis	SARS
<b><u>Anthrax</u></b>	Listeriosis	Shigatoxin-producing infection
Babesiosis	Lyme Disease	Shigellosis
<b><u>Botulism</u></b>	Lymphogranuloma venereum (LGV)	<b><u>Smallpox</u></b>
<b><u>Brucellosis</u></b>	Malaria	St. Louis Encephalitis
California Encephalitis	<b><u>Measles</u></b>	Staphylococcal Enterotoxin B
Campylobacteriosis	<b><u>Meiliodosi</u></b>	Poisoning
Chancroid	Meningitis (Aseptic & Viral)	Staphylococcal Aureus
Chlamydia trachomatis	<b><u>Meningitis (Haemophilus)</u></b>	<b><u>Streptococcal Infection (Group A beta-hemolytic strep)</u></b>
<b><u>Cholera</u></b>	<b><u>Meningitis (Meningococcal)</u></b>	Streptococcal Infection (Group B strep)
Cryptosporidiosis	Meningitis Other (specify type)	Streptococcal Infection (Invasive disease)
Cyclosporidiosis	<b><u>Meningococemia</u></b>	Streptococcus pneumoniae
<b><u>Diphtheria</u></b>	Monkey Pox	<b><u>Syphilis (specify stage) **</u></b>
E. Coli 0157:H7	Mumps	Tetanus
Eastern Equine Encephalitis	Pertussis	Toxic shock syndrome
Ehrlichiosis (HGE,HME)	<b><u>Plague</u></b>	Trichinosis
<b><u>Encephalitis</u></b>	<b><u>Poliomyelitis</u></b>	<b><u>Tuberculosis</u></b>
<b><u>Food borne illness</u></b>	Powassan Viral Encephalitis (POW)	<b><u>Tularemia</u></b>
Giardiasis	Pregnant Hepatitis B infection	<b><u>Typhoid</u></b>
<b><u>Glanders</u></b>	Psittacosis	Vibriosis
Gonorrhea	<b><u>Q Fever</u></b>	<b><u>Viral Hemorrhagic Fever</u></b>
Haemophilus Influenza	<b><u>Rabies</u></b>	West Nile Virus
Hantavirus	Rocky Mountain Spotted Fever	Yellow Fever
Hemolytic Uremic Syndrome (HUS)	<b><u>Rubella (including congenital rubella syndrome)</u></b>	Yersiniosis
Hepatitis A (HAV)		
<b><u>Hepatitis A in a food handler</u></b>		
Hepatitis B (HBV)		
Hepatitis C (HCV)		

\* Animal Bites - Health care providers must immediately report suspected rabid animals and persons exposed to them to the Environmental Health Services Division, DCDOH at (845) 486-3404. The full name, age, address and telephone number must be provided of any person under care, observation or who has been exposed to any animal suspected of having \*\* rabies. All pertinent facts relating to such exposure must be provided.

\*\* Syphilis - Report by phone any non-treponemal test  $\geq 1:16$  or any positive prenatal or delivery test regardless of titer; all others may be reported by mail.