

Section: UTMB On-line Documentation	01.27 - Policy
Subject: Infection Control & Healthcare Epidemiology Policies and Procedures	6/10/2025 - Revised
Topic: 01.27 - Reporting of Communicable Diseases to the Health Department	1988 - Author

01.27 - Reporting of Communicable Diseases to the Health Department

Purpose	To establish a system for reporting communicable diseases that are of public health importance to County Health Departments as required by state law.
Audience	Infection preventionists, physicians, clinical laboratory directors, and other staff members having knowledge that patients may have reportable diseases.
Policy	The Communicable Disease Prevention and Control Act (Texas Civil Statutes, Article 4419b-1), Health and Safety Code, Ch. 81 requires that certain diseases be reported.
Required Reporting	<i>Communicable diseases will be reported as per state law requirements. Diseases and suspect cases reportable immediately by telephone.</i>

 Texas Notifiable Conditions - 2025 <i>Report all Confirmed and Suspected cases</i> 24/7 Number for Immediately Reportable – 1-800-705-8868 Unless noted by*, report to your local or regional health department using number above or find contact information at http://www.dshs.texas.gov/idcu/investigation/conditions/contacts/			
A – L	When to Report	L – Y	When to Report
*Acquired immune deficiency syndrome (AIDS) ¹	Within 1 week	Legionellosis ²	Within 1 week
Amebic meningitis and encephalitis ²	Within 1 week	Leishmaniasis ²	Within 1 week
Anaplasmosis ²	Within 1 week	Listeriosis ^{2, 3}	Within 1 week
Anthrax ^{2, 3, 4}	Call immediately	Lyme disease ²	Within 1 week
Arboviral infections ^{2, 5, 6}	Within 1 week	Malaria ²	Within 1 week
*Asbestosis ⁷	Within 1 week	Measles (rubeola) ²	Call immediately
Ascariasis ²	Within 1 week	Melioidosis ^{2, 4}	Call immediately
Babesiosis ^{2, 4}	Within 1 week	Meningococcal infection, invasive (Neisseria meningitidis) ^{2, 3}	Call immediately
Botulism (adult and infant) ^{2, 3, 4, 8}	Call immediately ⁸	Mumps ²	Within 1 work day
Brucellosis ^{2, 3, 4}	Within 1 work day	Paragonimiasis ²	Within 1 week
Campylobacteriosis ²	Within 1 week	Pertussis ²	Within 1 work day
*Cancer ⁹	See rules ⁹	*Pesticide poisoning, acute occupational ¹⁰	Within 1 week
Candida auris ^{2, 3}	Within 1 work day	Plague (Yersinia pestis) ^{2, 3, 4}	Call immediately
Carbapenem-resistant Enterobacterales (CRE) ^{3, 11}	Within 1 work day	Polio myelitis, acute paralytic ²	Call immediately
Chagas disease ^{2, 4}	Within 1 week	Poliovirus infection, non-paralytic ²	Within 1 work day
*Chancroid ¹	Within 1 week	Prion diseases, such as Creutzfeldt-Jakob disease (CJD) ^{2, 12}	Within 1 week
*Chickenpox (varicella) ¹³	Within 1 week	Q fever ²	Within 1 work day
*Chlamydia trachomatis infection ¹	Within 1 week	Rabies, human ²	Call immediately
*Contaminated sharps injury ¹⁴	Within 1 month	Rubella (including congenital) ²	Within 1 work day
*Controlled substance overdose ¹⁵	Report immediately	Salmonellosis, including typhoid fever ^{2, 3}	Within 1 week
Coronavirus, novel ^{2, 16}	Call immediately	Shiga toxin-producing <i>Escherichia coli</i> ^{2, 3}	Within 1 week
<i>Cronobacter</i> spp. in infants, invasive ²	Within 1 week	Shigellosis ²	Within 1 week
Cryptosporidiosis ²	Within 1 week	Smallpox ^{2, 4}	Call immediately
Cyclosporiasis ²	Within 1 week	*Spinal cord injury ¹⁷	Within 10 work days
Cysticercosis ²	Within 1 week	Spotted fever rickettsiosis ²	Within 1 week
Diphtheria ^{2, 3}	Call immediately	Streptococcal disease (<i>S. pneumoniae</i>) invasive ^{2, 3}	Within 1 week
*Drowning/near drowning ¹⁷	Within 10 work days	* Syphilis – primary and secondary stages ^{1, 18}	Within 1 work day
Echinococcosis ²	Within 1 week	*Syphilis – all other stages including congenital syphilis ^{1, 18}	Within 1 week
Ehrlichiosis ²	Within 1 week	<i>Taenia solium</i> and undifferentiated <i>Taenia</i> infection ²	Within 1 week
Fascioliasis ²	Within 1 week	Tetanus ²	Within 1 week
*Gonorrhea ¹	Within 1 week	Tick-borne relapsing fever (TBRF) ²	Within 1 week
<i>Haemophilus influenzae</i> , invasive ^{2, 3}	Within 1 week	*Traumatic brain injury ¹⁷	Within 10 work days
Hansen's disease (leprosy) ¹⁹	Within 1 week	Trichinosis ²	Within 1 week
Hantavirus infection ²	Within 1 week	Trichuriasis ²	Within 1 week
Hemolytic uremic syndrome (HUS) ²	Within 1 week	Tuberculosis (Mycobacterium tuberculosis complex) ^{3, 20}	Within 1 work day
Hepatitis A ²	Within 1 work day	Tuberculosis infection ²¹	Within 1 week
Hepatitis B, C, and E (acute) ²	Within 1 week	Tularemia ^{2, 3, 4}	Call immediately
Hepatitis B infection identified prenatally or at delivery (mother) ²	Within 1 week	Typhus ²	Within 1 week
Hepatitis B, perinatal (HBSAg < 24 months old) (child) ²	Within 1 work day	Vancomycin-intermediate Staph aureus (VISA) ^{2, 3}	Call immediately
Hookworm (ancylostomiasis) ²	Within 1 week	Vancomycin-resistant Staph aureus (VRSA) ^{2, 3}	Call immediately
*Human immunodeficiency virus (HIV), acute infection ^{1, 22}	Within 1 work day	Vibrio infection, including cholera ^{2, 3}	Within 1 work day
*Human immunodeficiency virus (HIV), non-acute infection ^{1, 22}	Within 1 week	Viral hemorrhagic fever (including Ebola) ^{2, 4}	Call immediately
Influenza-associated pediatric mortality ²	Within 1 work day	Yellow fever ²	Call immediately
Influenza, novel ²	Call immediately	Yersiniosis ²	Within 1 week
* Lead, child blood, any level & adult blood, any level ²³	Call/Fax immediately		
In addition to specified reportable conditions, any outbreak, exotic disease, or unusual group expression of disease that may be of public health concern should be reported by the most expeditious means available. ²⁴ This includes any case of a select agent. ⁴ See select agent list at https://www.selectagents.gov/selectagentsandtoxinslist.html			

*See condition-specific footnotes for reporting contact information

Texas Notifiable Conditions Footnotes - 2025

- ¹ Please refer to specific rules and regulations for HIV/STD reporting and who to report to at: <http://www.dshs.texas.gov/hivstd/healthcare/reporting.shtm>.
- ² Reporting forms are available at <http://www.dshs.texas.gov/idcu/investigation/forms/> and investigation forms at <http://www.dshs.texas.gov/idcu/investigation/>. Call as indicated for immediately reportable conditions.
- ³ Lab samples of the following must be sent to the Department of State Health Services, Laboratory Services Section, 1100 West 49th Street, Austin, Texas 78756-3199 or other public health laboratory as designated by the Department of State Health Services: anthrax (*Bacillus anthracis*; also requested - *Bacillus cereus* isolates that may contain anthrax toxin genes from patients with severe disease or death); botulism, adult and infant (*Clostridium botulinum*); brucellosis (*Brucella* species); *Candida auris*; diphtheria (*Corynebacteria diphtheriae* from any site); all *Haemophilus influenzae*, invasive, in children under five years old (*Haemophilus influenzae* from normally sterile sites); listeriosis (*Listeria monocytogenes*); meningococcal infection, invasive (*Neisseria meningitidis* from normally sterile sites or purpuric lesions); plague (*Yersinia pestis*); salmonellosis, including typhoid fever (*Salmonella* species; also requested - specimens positive for *Salmonella* by culture-independent diagnostic testing (CIDT) methods); Shiga toxin-producing *Escherichia coli* infection (*E. coli* O157:H7, isolates or specimens from cases where Shiga toxin activity is demonstrated); *Staphylococcus aureus* with a vancomycin minimum inhibition concentration (MIC) greater than 2 micrograms per milliliter (µg/mL); all *Streptococcus pneumoniae*, invasive, in children under five years old (*Streptococcus pneumoniae* from normally sterile sites); tuberculosis (*Mycobacterium tuberculosis* complex); tularemia (*Francisella tularensis*); vibriosis (*Vibrio* species; also requested - specimens positive for *Vibrio* by culture-independent diagnostic testing (CIDT) methods); and any outbreak, exotic disease, or unusual group expression of disease that may be of public health concern may require submission of cultures or specimens. Pure cultures (or specimens) should be submitted as they become available accompanied by a current department Specimen Submission Form. See the [Texas Administrative Code \(TAC\) Chapter 97](#): §97.3(a)(4), §97.4(a)(6), and §97.5(a)(2)(C). Call 512-776-7598 for specimen submission information.
- ⁴ Please secure [Select Agent Isolates](#) and specimens in accordance with the guidance in the [Select Agent Regulation](#), and immediately initiate a consultation with public health regarding need for further testing or sequencing. Notify any transfer facilities of any test results of high consequence/interest.
- ⁵ Arboviral infections including, but not limited to, those caused by California serogroup viruses, chikungunya virus, dengue virus, Eastern equine encephalitis (EEE) virus, St. Louis encephalitis (SLE) virus, Western equine encephalitis (WEE) virus, West Nile (WN) virus, and Zika virus.
- ⁶ All blood collection centers should report all donors with reactive tests for West Nile virus, Zika virus, *Babesia* species, and *Trypanosoma cruzi* (Chagas disease) to the DSHS Zoonosis Control Branch. If your center uses a screening assay under an IND protocol, please include results of follow-up testing as well. To report, send a secure email to WNV@dshs.texas.gov or fax the report to 512-776-7454. Providing the following: Collection Agency; Unique BUI #; Test Name; Collection Date; Last Name, First Name, Donor Phone Number, Donor Address, Date of Birth, Age, Sex, Race, and Hispanic Ethnicity (Y/N). If your location has a city or county health department, DSHS recommends that you also share this same information with them.
- ⁷ For asbestos reporting information see <http://www.dshs.texas.gov/epitox/Asbestos-and-Silicosis-Surveillance/>.
- ⁸ Report suspected botulism immediately by phone to 888-963-7111.
- ⁹ For more information on cancer reporting rules and requirements go to <http://www.dshs.texas.gov/tcr/reporting.shtm>.
- ¹⁰ For pesticide reporting information see <https://www.dshs.texas.gov/sites/default/files/epitox/pestreport.pdf>.
- ¹¹ *Escherichia coli* or *Klebsiella* species that are resistant to at least one carbapenem antibiotic or produce a carbapenemase.
- ¹² For purposes of surveillance and notification, Prion diseases, such as Creutzfeldt-Jakob disease (CJD) includes sporadic CJD (sCJD), and also includes sporadic fatal insomnia (sFI), Variably Protease-Sensitive Prionopathy (VPSPr), any genetic CJD (gCJD) or familial CJD (fCJD), fatal familial insomnia (FFI), Gerstmann-Sträussler-Scheinker syndrome (GSS), iatrogenic CJD (iCJD), Kuru, variant CJD (vCJD), and any novel prion disease affecting humans.
- ¹³ Call your [local health department](#) for a copy of the Varicella Reporting Form with their fax number. The [Varicella \(Chickenpox\) Reporting Form](#) should be used instead of an Epi-1 or Epi-2 morbidity report.
- ¹⁴ Applicable for governmental entities. Not applicable to private facilities. ([TAC §96.201](#)) Initial reporting forms for Contaminated Sharps at http://www.dshs.texas.gov/idcu/health/infection_control/bloodborne_pathogens/reporting/.
- ¹⁵ To report a Controlled Substance Overdose, go to <https://odreport.dshs.texas.gov/>.
- ¹⁶ Novel coronavirus causing severe acute respiratory disease includes Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). Call immediately for SARS, MERS, or any other novel coronavirus cases. Coronavirus Disease 2019 (COVID-19) is no longer considered a novel coronavirus and as of March 1, 2024 is no longer a notifiable disease condition in Texas.
- ¹⁷ Please refer to specific rules and regulations for injury reporting and who to report to at <http://www.dshs.texas.gov/injury/rules.shtm>.
- ¹⁸ Laboratories should report syphilis test results within 3 work days of the testing outcome.
- ¹⁹ Reporting forms are available at <https://www.dshs.texas.gov/idcu/disease/hansens/forms.shtm>.
- ²⁰ Reportable tuberculosis disease includes the following: suspected tuberculosis disease pending final laboratory results; positive nucleic acid amplification tests; clinically or laboratory-confirmed tuberculosis disease; and all *Mycobacterium tuberculosis* (*M. tb*) complex including *M. tuberculosis*, *M. bovis*, *M. africanum*, *M. canettii*, *M. microti*, *M. caprae*, and *M. pinnipedii*. See rules and reporting information at <http://www.dshs.texas.gov/idcu/disease/tb/reporting/>.
- ²¹ TB infection is determined by a positive result from an FDA-approved Interferon-Gamma Release Assay (IGRA) test such as T-Spot® TB or QuantiFERON® - TB GOLD In-Tube Test or a tuberculin skin test, and a normal chest radiograph with no presenting symptoms of TB disease. See rules and reporting information at <http://www.dshs.texas.gov/idcu/disease/tb/reporting/>. Please report skin test results in millimeters.
- ²² Any person suspected of having HIV should be reported, including HIV exposed infants.
- ²³ For lead reporting information see <http://www.dshs.texas.gov/lead/Reporting-Laws-Administrative-Code.aspx>.
- ²⁴ For more information on Mpox reporting requirements go to <https://www.dshs.texas.gov/monkeypox/monkeypox-information-public-health>.

ES9-11364 (Rev. 09/18/24) Expires 12/31/25 – Go to <https://www.dshs.texas.gov/notifiable-conditions/investigation-guidance> or call your local or regional health department for updates.

Required Reporting (cont.)

- For most diseases, a report should include the following: name, birthdate, sex, race/ethnicity, address, telephone number, disease/condition, onset date, healthcare provider, and method of diagnosis. Report as many of the above items as possible, plus other appropriate, useful information if available.
- Guidance on recommended testing procedures is available in the Texas Department of Health publication titled “Identification and Confirmation of Reportable Diseases.”
- The GCHD Disease Report Form is available from the UTMB Department of Infection Control & Healthcare Epidemiology (ICHE) and from the Galveston

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County Health District, Epidemiology, P.O. Box 838, Galveston, Texas 77553.

- Report AIDS, chancroid, Chlamydia trachomatis infection, gonorrhea, HIV infection, and syphilis to Galveston County Health District, STD Control, P.O. Box 838, Galveston, TX 77553.

NOTE: Invasive infection means the pathogen was isolated from a normally sterile site (e.g. blood, CSF).

Procedure

- Report AIDS, chancroid, chlamydia trachomatis infection, gonorrhea, HIV and syphilis infections by mail only to GCHD, Sexually Transmitted Disease Control, P.O. Box 838, Galveston, Texas 77553.
- Forms for these reports are available from GCHD STD Control and from ICHE
- In addition to the requirement of individual case reports, any unusual disease occurrence or outbreak of public health concern should be reported by the most expeditious means to the local health authority (GCHD).
- Report by telephone suspected foodborne diseases to GCHD, Environmental and Consumer Health, P.O. Box 939, LaMarque, Texas, 77568.
- For Chickenpox, report only numbers of cases by age per week or other specified period.

Responsibility

- The Clinical Microbiology and Immunology Divisions in Laboratory Medicine in the Department of Pathology are responsible for contacting the physician and ICHE immediately with reports of the above diseases. STDs may be reported directly to GCHD.
- The Admitting Department and the admitting physician are responsible for notifying ICHE immediately upon admission of a patient suspected or known to have one of the above diseases.
- The physician, nurse manager, or their designee is responsible for contacting ICHE immediately about hospitalized patients who are suspected of having or are known to have a disease from one of the above lists.
- All communicable diseases (with the exception of STDs) whether reported to the GCHD or not, should be reported to ICHE.

The Department of Infection Control & Healthcare Epidemiology (ICHE) telephone number is: (409) 772-3192. After hours on weekdays, on weekends and on holidays, ICHE personnel may be reached by paging (409) 643-3133.

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References

1. Texas Department of Health, Rules and Regulations for the Control of Communicable and Sexually Transmitted Diseases, 10/94 and subsequent revisions.
2. Texas Department of Health, Identification and Confirmation of Reportable Diseases, Stock No. 6-142.
3. Texas Department of State Health Services – Texas Notifiable Conditions.
<http://www.dshs.state.tx.us/idcu/investigation/conditions/>