### URGENT NOTIFICATION WITHIN 24 HOURS:
**BY ELECTRONIC LABORATORY REPORTING AND REQUIRED EPID FORM**

- Anthrax
- Botulism
- Brucellosis (multiple cases, temporally or spatially clustered)
- Diphtheria
- Hepatitis A, acute
- Measles
- Meningococcal infections
- Middle East Respiratory Syndrome associated Coronavirus (MERS-CoV) disease
- Multi-system Inflammatory Syndrome in Children (MIS-C)
- Novel influenza A virus infections
- Orthopox virus infection, including:
  - Monkeypox
  - Smallpox
  - Vaccinia
- Plague
- Poliomyelitis
- Rabies, animal
- Rabies, human
- Rubella
- Severe Acute Respiratory Syndrome Associated Coronavirus (SARS-CoV-2)
- Severe Acute Respiratory Syndrome Associated Coronavirus 2 (SARS-CoV-2) (The virus that causes COVID-19)
- Tularemia
- Viral hemorrhagic fevers due to:
  - Crimean-Congo Hemorrhagic Fever virus
  - Ebola virus
  - Lassa virus
  - Lujo virus
  - Marburg virus
- New world arenaviruses including:
  - Guanarito virus
  - Junin virus
  - Machupo virus
  - Sabia virus
- Yellow fever

### PRIORITY NOTIFICATION WITHIN ONE (1) DAY:
**BY ELECTRONIC LABORATORY REPORTING AND REQUIRED EPID FORM**

- Arboviral diseases, neuroinvasive and non-neuroinvasive, including:
  - 1. California serogroup virus diseases, including diseases caused by:
     - California encephalitis virus
     - Jamestown Canyon virus
     - Keystone virus
     - La Crosse virus
     - Snowshoe hare virus
     - Trivittatus viruses
  - Chikungunya virus disease
  - Eastern equine encephalitis virus disease
  - Powassan virus disease
  - St. Louis encephalitis virus disease
  - Venezuelan encephalitis virus disease
  - West Nile virus disease
  - Wester equine encephalitis virus disease
  - Zika virus
    - disease or infection or the birth of a child to a mother who was Zika-positive or Zika-inconclusive during any stage of pregnancy or during the periconceptional period

- Brucellosis (cases not temporally or spatially clustered)
- Campylobacteriosis
- Carbon monoxide poisoning
- Cholera
- Congenital syphilis
- Cryptosporidiosis
- Cyclosporiasis
- Dengue virus infections
- Escherichia coli O157:H7
- Foodborne disease outbreak
- Giardiasis
- Haemophils influenzae invasive disease
- Hansen’s disease (leprosy)
- Hantavirus infection, non-Hantavirus pulmonary syndrome
- Hantavirus pulmonary syndrome (HPS)
- Hemolytic uremic syndrome (HUS)
- Histoplasmosis
- Legionellosis
- Leptospirosis
- Listeriosis
- Mumps
- Norovirus outbreak
- Pertussis
- Pesticide-related illness, acute
- Psittacosis
- Q fever
- Rubella, congenital syndrome
- Salmonellosis
- Shiga toxin-producing E. coli (STEC)
- Shigellosis
- Streptococcal toxic-shock syndrome
- Streptococcus pneumoniae, invasive disease
- Syphilis - primary, secondary, or early latent
- Tetanus
- Toxic-shock syndrome (other than Streptococcal)
- Tuberculosis
- Typhoid fever
- Varicella
- Vibrio
- Waterborne disease outbreak

### ROUTINE NOTIFICATION WITHIN FIVE (5) DAYS:
**BY ELECTRONIC LABORATORY REPORTING AND REQUIRED EPID FORM**

- Acute Flaccid Myelitis
- Anaplasmosis
- Babesiosis
- Chancroid
- Chlamydia trachomatis infection
- Coccidioidomycosis
- Creutzfeldt-Jakob disease
- Ehrlichiosis
- Gonorrhea
- Granuloma inguinale
- Hepatitis C, acute
- Hepatitis C infection in a pregnant woman
- Hepatitis C infection in an infant or a child aged five (5) years or less
- HIV infection or AIDS diagnosis
- Lymphogranuloma venereum
- Newborns born to Hepatitis C positive mothers at the time of delivery
- Histoplasmosis
- Lead poisoning
- Lyme Disease
- Malaria
- Spotted Fever Rickettsiosis (Rocky Mountain Spotted Fever)
- Syphilis - other than primary, secondary, early latent, or congenital
- Toxoplasmosis
- Trichinelllosis (Trichinosis)

### ROUTINE NOTIFICATION WITHIN 24 HOURS:
**BY ELECTRONIC LABORATORY REPORTING VIA EPID 256**

- Candida auris
- Carbenapen-resistant – Acinetobacter
- Carbenapen-resistant – Enterobacteriaceae (CRE)
- Carbenapen-resistant – Pseudomonas
- Vancomycin-intermediate Staphylococcus aureus (VISA)
- Vancomycin-resistant Staphylococcus aureus (VRSA)

### NOTIFICATION WITHIN 3 MONTHS OF DIAGNOSIS:

- Asbestosis
- Coal worker’s pneumoconiosis
- Silicosis

### ROUTINE NOTIFICATION WITHIN FIVE (5) BUSINESS DAYS:
**BY ELECTRONIC LABORATORY REPORTING**

- Hepatitis B & Hepatitis C Laboratory test results whether reported as positive or negative:
  - Include the serum bilirubin levels taken within 10 (ten) days of the test of a patient who has tested positive; or
  - Include the serum alanine amino transferase levels taken within 10 (ten) days of the test of a patient who tested positive
- Varicella laboratory test results reported as positive for:
  - Isolation of varicella virus from a clinical specimen
  - Varicella antigen detected by direct fluorescent antibody test
  - Varicella-specific nucleic acid detected by polymerase chain reaction (PCR)
- Multi-drug Resistant Organisms:
  - Clostridioles (Formerly Clostridium difficile (C. difficile)
  - Enterobacteriaceae species resistant to cefazidime, ceftriaxone, or cefotaxime
  - Methicillin-resistant Staphylococcus aureus (MRSA)
  - Vancomycin resistant Enterococcus species (VRE)

### NOTIFICATION MADE BY ELECTRONIC LABORATORY REPORTING:

- Submission of Clinical Isolates to the Kentucky Department for Public Health Division of Laboratory Services (DLS) Required
- Routine Notification made by Electronic Laboratory Reporting and EPID 256
- Routine Notification made by Electronic Laboratory Reporting and EPID 250
- Routine Notification made by Electronic Laboratory Reporting and EPID 294

### REVIEW KDPH HIV/AIDS Section:

- for reporting requirements

### Immediate Report by Telephone:

1. A suspected incidence of bioterrorism caused by a biological agent
2. Submission of a specimen to the Kentucky Division of Laboratory Services for select agent identification or select agent confirmation testing
3. An outbreak of a disease or condition that resulted in multiple hospitalizations or death.
4. An unexpected pattern of cases, suspected cases, or deaths which may indicate the following shall be reported immediately by telephone to the local health department in the county where the health professional is practicing or where the facility is located:
   - a. A newly-recognized infectious agent
   - b. An outbreak
   - c. An emerging pathogen which may pose a danger to the health of the public
   - d. An epidemic
   - e. A non-infectious chemical, biological, radiological agent.