REPORTABLE DISEASES AND CONDITIONS IN KENTUCKY

Kentucky Public Health
Prevent. Promote. Protect.

902 KAR 2:020: Amended Table of Reportable Diseases and Conditions in Kentucky (Effective 02/10/2025)

https://apps.legislature.ky.gov/law/kar/902/002/020.pdf

** Select Any Disease/Condition to be redirected to the CDC Case Definition **

Updated: 2/10/2025

URGENT NOTIFICATION WITHIN 24 HOURS:

BY ELECTRONIC LABORATORY REPORTING AND REQUIRED EPID FORM

- **Anthrax**
- **Botulism**
- **Brucellosis** (multiple cases, temporally or spatially clustered)
- **Cronobacter spp,** invasive disease in an infant <12 months of age
- **Diphtheria**
- **Hepatitis A, acute**
- **Measles**
- **Melioidosis**
- **Meningococcal infections**
  - Neisseria meningitidis (isolate from sterile specimen site)
- **Middle East Respiratory Syndrome associated Coronavirus (MERS-CoV) disease**
- **Novel influenza A virus infections**
- **Orthopox virus infection, including:**
  - Mpox
  - Smallpox
  - Vaccinia
- **Plague**
- **Poliomyelitis**
- **Rabies, animal**
- **Rabies, human**
- **Rubella**
- **Severe Acute Respiratory Syndrome Associated Coronavirus (SARS-CoV)**
- **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) BUSINESS DAY:

BY ELECTRONIC LABORATORY REPORTING VIA EPID 250

- **Candida auris**
- **Carbapenem-resistant – Acinetobacter**
- **Carbapenem-resistant – Enterobacterales (CRE)**
- **Carbapenem-resistant – Pseudomonas**
- **Vancomycin-intermediate Staphylococcus aureus (VISA)**
- **Vancomycin-resistant Staphylococcus aureus (VRSA)**

PRIORITY NOTIFICATION WITHIN ONE (1) BUSINESS 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
  2. **Chikungunya virus disease**
  3. **Eastern equine encephalitis virus disease**
  4. **Powassan virus disease**
  5. **St. Louis encephalitis virus disease**
  6. **Venezuelan equine encephalitis disease**
  7. **West Nile virus disease**
  8. **Western equine encephalitis virus disease**
  9. **Zika virus**, non-congenital or congential
- **Brucellosis** (cases not temporally or spatially clustered)
- **Campylobacteriosis**
- **Carbon monoxide poisoning**
- **Cholera**
- **COVID-19 associated mortality** in a patient who is:
  - <18, OR Pregnant/postpartum (within 3 months of delivery)
- **Cryptosporidiosis**
- **Cyclosporiasis**
- **Dengue virus infections**
- **Foodborne disease outbreak**
- **Free-living amoeba infections:**
  - Acanthamoeba disease
  - Acanthamoeba keratitis
  - Balamuthia mandrillaris
  - Naegleria fowleri causing primary amebiv meningoencephalitis (PAM)
- **Giardiasis**
- **Haemophilus influenzae invasive disease**
- **Hantavirus infection, non-Hantavirus pulmonary syndrome**
- **Hantavirus pulmonary syndrome (HPS)**
- **Hemolytic uremic syndrome (HUS), postdiarrheal**
- **Hepatitis B, acute**
- **Hepatitis B infection** in a pregnant woman
- **Hepatitis B infection** in an infant or child aged two (2) years or less
- **Newborns born to Hepatitis B positive mothers at the time of delivery**
- **Influenza-associated mortality** in a patient who is:
  - <18, OR Pregnant/postpartum (within 3 months of delivery)
- **Legionellosis**, including Pontiac Fever and extrapulmonary disease
- **Leprosy** (Hansen's Disease)
- **Leptospirosis**
- **Listeriosis**
  - Listeria monocytogenes
- **Mumps**
- **Norovirus outbreak**
- **Pertussis**
- **Pesticide-related illness, acute**
- **Psittacosis**
- **Q fever**
- **Respiratory Syncytial virus (RSV)-associated mortality** in a patient who is:
  - <18, OR Pregnant/postpartum (within 3 months of delivery)
- **Rubella, congenital syndrome**
- **Salmonella**
- **Shiga toxin-producing E. coli** (STEC)
  - Shiga toxin-producing E. coli (STEC) or verotoxin-producing E.coli (VTEC) including E.coli O1457:H7
- **Shigellosis**
- **Streptococcal toxic-shock syndrome**
- **Streptococcus pneumoniae, invasive disease** (i.e. invasive pneumococcal disease)
- **Syphilis** - primary, secondary, or early latent
- **Tetanus**
- **Toxic-shock syndrome** (other than Streptococcal)
- **Tuberculosis**
  - mycobacterium tuberculosis (TB)
- **Typhoid fever**
- **Varicella**
- **Vibriosis**
  - **Vibrio species,** including those that cause cholera and other disease
- **Waterborne disease outbreak**

ROUTINE NOTIFICATION WITHIN FIVE (5) BUSINESS DAYS:

BY ELECTRONIC LABORATORY REPORTING AND REQUIRED EPID FORM

- **Acute Flaccid Myelitis**
- **Alpha-gal Syndrome**
- **Anaplasmosis**
- **Babesiosis**
- **Chancroid**
- **Chlamydia trachomatis infection**
- **Coccidioidomycosis**
- **Creutzfeldt-Jakob disease**
- **Ehrlichiosis**
- **Gonorrhea**
- **Granuloma inguinale**
- **Hepatitis C, acute**
- **Hepatitis C infection**
  - in a pregnant woman
  - in an infant or child aged three (3) years or less
- **Newborns born to Hepatitis C positive mothers at the time of delivery**
- **HIV infection or AIDS diagnosis**
- **Histoplasmosis**
- **Lead poisoning**
- **Lyme Disease**
- **Lymphogranuloma venereum**
- **Malaria**
- **Multi-system Inflammatory Syndrome in Children (MIS-C)**
- **Spotted Fever Rickettsiosis (Rocky Mountain Spotted Fever)**
- **Syphilis** - other than primary, secondary, early latent, or congenital
- **Toxoplasmosis**
- **Trichinellosis (Trichinosis)**

NOTIFICATION WITHIN 3 MONTHS OF DIAGNOSIS:

- **Asbestosis**
- **Pneumoconiosis,** including Coal worker's pneumoconiosis
- **Silicosis**

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 200

Routine Notification made by Electronic Laboratory Reporting and EPID 250

Routine Notification made by Electronic Laboratory Reporting and EPID 394

Routine Notification made by Electronic Laboratory Reporting and EPID 399

Review KDPH HIV/AIDS Section for reporting Requirements

Report Immediately 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 maypose a danger to the health of the public
   d. An epidemic
   e. A non-infectious chemical, biological, or radiological agent.

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 ten (10) days of the test of a patient who has tested positive; or
  - Include the serum alanine amino transferase levels taken within ten (10) days of the test of a patient who tested positive
- **Laboratory-confirmed influenza, detected by:**
  - Reverse transcriptase polymerase chain reaction (RT PCR)
  - Nucleic acid detection; or
  - viral culture
- **Laboratory confirmed Respiratory Syncytial virus (RSV), detected by**
  - Nucleic Acid Amplification Test (NAAT), including polymerase chain reaction (PCR)
- **Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-Co-V-2 detected by**
  - NAAT, including PCR; or
  - SARS-CoV-2 molecular sequencing
- **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 PCR
- **Multi-drug Resistant Organisms:**
  - Clostridioides (Formerly Clostridium) difficile (C. difficile)
  - Enterobacterales species resistant to ceftazidime, ceftriaxone, or cefotaxime
  - Methicillin-resistant Staphylococcus aureus (MRSA)
  - Vancomycin resistant Enterococcus species (VRE).