

Report

Diseases & Conditions

The following are mandated by the State of Illinois to be reported to Kane County Health Department within the designated time frames. We thank you for your assistance.

Class I A

Within 3 Hours

ANTHRAX
BOTULISM, FOODBORNE
PLAGUE

Q-FEVER
SMALLPOX
TULAREMIA
ANY SUSPECTED BIOTERRORIST THREAT OR EVENT

Class I B

24 Hours

ANY UNUSUAL CASE OR CLUSTER OF CASES THAT MAY INDICATE A PUBLIC HEALTH HAZARD
BOTULISM, INFANT, WOUND, AND OTHER
CHOLERA
DIARRHEA OF THE NEWBORN
DIPHTHERIA
ENTERIC ESCHERICHIA COLI INFECTIONS (E. COLI: O157:H7 AND OTHER ENTEROHEMORRHAGIC E. COLI, ENTEROTOXIGENIC E. COLI, ENTEROPATHOGENIC E. COLI)
FOODBORNE OR WATERBORNE ILLNESS
HAEMOPHILUS INFLUENZAE, MENINGITIS AND OTHER INVASIVE DISEASE
HEMOLYTIC UREMIC SYNDROME, POST-DIARRHEAL
HEPATITIS A

MEASLES
NEISSERIA MENINGITIDIS, MENINGITIS AND INVASIVE DISEASE
PERTUSSIS (WHOOPIING COUGH)
POLIOMYELITIS
RABIES, HUMAN
RABIES, POTENTIAL HUMAN EXPOSURE
STAPHYLOCOCCUS AUREUS INFECTIONS WITH INTERMEDIATE OR HIGH LEVEL RESISTANCE TO VANCOMYCIN
STREPTOCOCCAL INFECTIONS, GROUP A, INVASIVE, (INCLUDING TOXIC SHOCK SYNDROME) AND SEQUELAE TO GROUP A STREPTOCOCCAL INFECTIONS (RHEUMATIC FEVER, AND ACUTE GLOMERULONEPHRITIS)
TYPHOID FEVER
TYPHUS

Class II

7 Days

ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)
AMEBIASIS
BLASTOMYCOSIS
CAMPYLOBACTERIOSIS
CHANCROID
CHICKENPOX
CHLAMYDIA
CRYPTOSPORIDIOSIS
CYCLOSPORIASIS
EHRLICHIOSIS, HUMAN GRANULOCYTIC
EHRLICHIOSIS, HUMAN MONOCYTIC
ENCEPHALITIS
GIARDIASIS
GONORRHEA
HANTAVIRUS PULMONARY SYNDROME
HEPATITIS B
HEPATITIS C
HEPATITIS, VIRAL, OTHER
HISTOPLASMOSES
HUMAN IMMUNODEFICIENCY VIRUS (HIV) INFECTION*
LEGIONNAIRES' DISEASE (LEGIONELLOSIS)
LEPROSY
LEPTOSPIROSIS

LISTERIOSIS
LYME DISEASE
MALARIA
MENINGITIS, ASPECTIC (INCLUDING ARBOVIRAL INFECTIONS)
MUMPS
OPHTHALMIA NEONATORUM (GONOCOCCAL)
PSITTACOSIS
ROCKY MOUNTAIN SPOTTED FEVER
RUBELLA, INCLUDING CONGENITAL RUBELLA SYNDROME
SALMONELLOSIS (OTHER THAN TYPHOID FEVER)
SHIGELLOSIS
STAPHYLOCOCCUS AUREUS INFECTION, TOXIC SHOCK SYNDROME
STAPHYLOCOCCUS AUREUS INFECTIONS OCCURRING IN INFANTS UNDER 28 DAYS OF AGE (WITHIN A HEALTH CARE INSTITUTION OR WITH ONSET AFTER DISCHARGE)
STREPTOCOCCAL INFECTIONS, GROUP B, INVASIVE DISEASE, OF THE NEWBORN
STREPTOCOCCUS PNEUMONIAE, INVASIVE DISEASE (INCLUDING ANTIBIOTIC SUSCEPTIBILITY TEST RESULTS)
SYPHILIS
TETANUS
TRICHINOSIS
TUBERCULOSIS
YERSINIOSIS

Call and report 24 hours a day —

630-208-3801

All reports are confidential and should include:

- the disease or condition being reported
 - physician's name, address and telephone number
 - patient's name, age, sex, race/ethnicity, address and telephone number
- *HIV reporting is by patient code number (PCN)