

Mandated reporters such as health care providers, hospitals and laboratories must report* any suspected or confirmed case of these diseases to the Kane County Health Department within the designated time frames.

Class I A

Within 3 HOURS

ANTHRAX
BOTULISM, FOODBORNE
BRUCELLOSIS**
INFLUENZA A, NOVEL VIRUS

PLAGUE
Q FEVER**
SEVERE ACUTE RESPIRATORY SYNDROME (SARS)
SMALLPOX

TULAREMIA**
ANY SUSPECTED BIOTERRORIST THREAT OR EVENT
ANY UNUSUAL CASE OR CLUSTER OF CASES THAT
MAY INDICATE A PUBLIC HEALTH HAZARD

Class I B

24 HOURS

BOTULISM, INTESTINAL, WOUND, OR OTHER
CHICKENPOX
CHOLERA
DIPHTHERIA
ENTERIC *ESCHERICHIA COLI* INFECTIONS
(E. COLI: O157:H7, STEC, EIEC, EPEC, ETEC)
FOODBORNE OR WATERBORNE ILLNESS
GLOMERULONEPHRITIS, ACUTE STREPTOCOCCAL
HAEMOPHILUS INFLUENZAE, MENINGITIS AND OTHER INVASIVE DISEASE
HANTAVIRUS PULMONARY SYNDROME
HEMOLYTIC UREMIC SYNDROME, POST-DIARRHEAL
HEPATITIS A
MEASLES
MUMPS
NEISSERIA MENINGITIDIS, MENINGITIS, MENINGOCOCCEMIA, INVASIVE DISEASE

PERTUSSIS (WHOOPIING COUGH)
POLIOMYELITIS
RABIES, HUMAN AND POTENTIAL HUMAN EXPOSURE
RUBELLA (INCLUDING CONGENITAL RUBELLA SYNDROME)
RHEUMATIC FEVER
SMALLPOX VACCINATION COMPLICATION
STAPHYLOCOCCUS AUREUS, METHICILLIN RESISTANT (MRSA) CLUSTERS IN A
COMMUNITY SETTING OR INFECTION IN INFANTS <61 DAYS
STAPHYLOCOCCUS AUREUS INFECTIONS WITH INTERMEDIATE OR
HIGH LEVEL RESISTANCE TO VANCOMYCIN
STREPTOCOCCAL INFECTIONS, GROUP A, INVASIVE, INCLUDING TOXIC SHOCK
SYNDROME, NECROTIZING FASCIITIS AND SEQUELAE TO GROUP A
STREPTOCOCCAL INFECTIONS (RHEUMATIC FEVER AND ACUTE GLOMERULONEPHRITIS)
TOXIC SHOCK SYNDROME, STREPTOCOCCAL
TYPHOID FEVER
TYPHUS
WHOOPIING COUGH (PERTUSSIS)

Class II

7 DAYS

ARBOVIRAL INFECTIONS (INCLUDING WEST NILE VIRUS, CALIFORNIA,
ST. LOUIS, EASTERN AND WESTERN EQUINE ENCEPHALITIS,
CHIKUNGUNYA, DENGUE)
AIDS (ACQUIRED IMMUNODEFICIENCY SYNDROME)
BRUCELLOSIS
CALIFORNIA ENCEPHALITIS
CHANCROID
CHIKUNGUNYA
CHLAMYDIA
CREUTZFELDT – JAKOB DISEASE (CJD)
CRYPTOSPORIDIOSIS
CYCLOSPORIASIS
DENGUE
EASTERN EQUINE ENCEPHALITIS
EHRlichiosis, HUMAN GRANULOCYTOTROPIC ANAPLASMOSIS (HGA)
EHRlichiosis, MONOCYTOTROPIC (HME)
GIARDIASIS
GONORRHEA
HEPATITIS B (CASES OR CARRIERS)
HEPATITIS C
HEPATITIS D
HISTOPLASMOSIS
HIV (HUMAN IMMUNODEFICIENCY VIRUS) INFECTION
INFLUENZA, DEATHS IN THOSE <18 YRS. OLD
LEGIONELLOSIS (LEGIONNAIRES' DISEASE)
LEPROSY

LEPTOSPIROSIS
LISTERIOSIS
LYME DISEASE
MALARIA
OPHTHALMIA NEONATORUM (GONOCOCCAL)
PSITTACOSIS
Q FEVER
REYE SYNDROME
ROCKY MOUNTAIN SPOTTED FEVER
SALMONELLOSIS (OTHER THAN TYPHOID FEVER)
SHIGELLOSIS
ST. LOUIS ENCEPHALITIS
STREPTOCOCCUS PNEUMONIAE MENINGITIS AND OTHER INVASIVE DISEASE
IN THOSE <5 YRS. OLD
STREPTOCOCCUS PNEUMONIAE, DRUG RESISTANT MENINGITIS AND OTHER
INVASIVE DISEASE IN ALL AGES
SYPHILIS
TETANUS
TICKBORNE DISEASE (ANAPLASMOSIS, EHRlichiosis, LYME, ROCKY MOUNTAIN SPOTTED FEVER)
TOXIC SHOCK SYNDROME, *STAPHYLOCOCCUS AUREUS*
TRICHINOSIS
TUBERCULOSIS
TULAREMIA
VIBRIOSIS (NON-CHOLERA VIBRIO INFECTIONS)
WEST NILE VIRUS
WESTERN EQUINE ENCEPHALITIS
YERSINIOSIS

*Control of Communicable Disease Code - 77 Illinois Administrative Code 690, March 3, 2008

** If suspected to be a bioterrorist event or part of an outbreak

4/08

Report 24 hours a day

630-208-3801

All reports are confidential and should include:

- the disease or condition being reported
- patient's name, age, sex, race/ethnicity, address and telephone number
- physician's name, address and telephone number