

Notification of the following Notification of the following Notification of the following diseases or conditions shall be considered diseases shall be considered diseases shall be considered priority and shall be made within one (1) business day: routine and shall be made urgent and shall be made within twenty-four (24) hours: within five (5) business days: Anthrax; Arboviral diseases, neuroinvasive and non-Hansen's disease (leprosy); Acute Flaccid Myelitis; Botulism: neuroinvasive, including: Hantavirus infection, non-Hantavirus Anaplasmosis; Brucellosis (multiple cases, temporally or pulmonary syndrome: 1. California serogroup virus diseases, Babesiosis; spatially clustered): Hantavirus pulmonary syndrome (HPS); including diseases caused by: Coccidioidomycosis: Diphtheria: Hemolytic uremic syndrome (HUS), posta. California encephalitis virus: Creutzfeldt-Jakob disease: Hepatitis A, acute: diarrheal: b. Jamestown Canyon virus; Ehrlichiosis: Measles: Hepatitis B, acute; c. Keystone virus; Hepatitis C, acute; Meningococcal infections; Hepatitis B infection in a pregnant woman; d. La Crosse virus; Hepatitis C infection in a pregnant woman: Middle East Respiratory Syndrome-Hepatitis B infection in an infant or a child e. Snowshoe hare virus: Hepatitis C infection in an infant or a child associated Coronavirus (MERS-CoV) aged five (5) years or less; f. Trivittatus viruses: aged five (5) years or less; Newborns born to Hepatitis B positive disease; 2. Chikungunya virus disease; Newborns born to Hepatitis C positive Multi-system Inflammatory Syndrome in mothers at the time of delivery; 3. Eastern equine encephalitis virus mothers at the time of delivery; Children (MIS-C); Influenza-associated mortality: disease: Histoplasmosis; Novel influenza A virus infections; Legionellosis; 4. Powassan virus disease; Lead poisoning; Plaque: Leptospirosis; 5. St. Louis encephalitis virus disease; Lvme Disease: Poliomyelitis; Listeriosis; 6. Venezuelan equine encephalitis Malaria: Rabies, animal; Mumps: disease: Spotted Fever Rickettsiosis (Rocky Rabies, human; Norovirus outbreak; 7. West Nile virus disease: Mountain Spotted Fever); Rubella: Pertussis: 8. Western equine encephalitis virus Toxoplasmosis; and Severe Acute Respiratory Syndrome-Pesticide-related illness, acute; Trichinellosis (Trichinosis). Associated Coronavirus (SARS-CoV); disease; and Psittacosis: Severe Acute Respiratory Syndrome-9. Zika virus disease or infection orthe O fever: Associated Coronavirus 2 (SARS-CoV-2) birth of a child to a mother who was Rubella, congenital syndrome; (The virus that causes COVID-19); Zika-positive or Zika-inconclusive Salmonellosis: Smallpox; HIV infection or AIDS diagnosis; during any stage of pregnancy or Shiga toxin-producing *E. coli* (STEC); Tularemia: during the periconceptional period; Shiaellosis: Varicella: Streptococcal toxic-shock syndrome; Brucellosis (cases not temporally or Chancroid; Viral hemorrhagic fevers due to: Streptococcus pneumoniae, invasive spatially clustered); 1. Crimean-Congo Hemorrhagic Chlamydia trachomatis infection; disease; Campylobacteriosis: Fever virus: Gonorrhea; Tetanus: Carbon monoxide poisoning 2. Ebola virus; Toxic-shock syndrome (other than Granuloma inquinale; Cholera; 3. Lassa virus; Streptococcal); Lymphogranuloma venereum; or Cryptosporidiosis; 4. Luio virus: Tuberculosis; Cyclosporiasis; Syphilis, other than primary, secondary, 5. Marburg virus; or Typhoid fever: Dengue virus infections; early latent, or congenital. 6. New world arenaviruses including: Varicella; Escherichia coli 0157:H7; a. Guanarito virus: Vibriosis: Foodborne disease outbreak; b. Junin virus: Waterborne disease outbreak; Giardiasis: c. Machupo virus; Haemophilus influenzae invasive disease; d. Sabia virus. Yellow fever; Syphilis - primary, secondary, or Congenital syphilis;

early latent;



Botulism; Brucellosis; Campylobacterosis; Campylobacterosis; Candida auris; Carbapenem-resistant – Enterobacteriaceae; (CRE); Carbapenem-resistant – Enterobacteriaceae; (CRE); Carbapenem-resistant – Seudomonas; Vancomycin-intermediate Staphylococcus aureus (VISA); and Vancomycin-intermediate Staphylococcus aureus, Vancomycin-intermediate Staphylococcus aureus, Vancomycin-intermediate Staphylococcus aureus; Vancomycin-intermediate Staphylococcus aureus (VISA); and Vancomycin-intermediate Staphylococcus aureus (VISA); and Vancomycin-intermediate Staphylococcus aureus (VISA); and Vancomycin-intermediate Staphylococcus aureus; Vancomycin-intermediate Staphylococcus aureus; Vancomycin-intermediate Staphylococcus aureus; Vancomycin-	Submission of Clinical Isolates, or if Not Available, the Direct Specimen for the Following Diseases	Routine Notification within One (1) Business Day, by Electronic Laboratory Reporting and EPID 250:	Routine Notification within Five (5) Business Days, by Electronic LaboratoryReporting:	Report Immediately by Telephone:
	Brucellosis; Campylobacterosis; Candida auris; Carbapenem-resistant Acinetobacter; Carbapenem-resistant Enterobacteriaceae; Carbapenem-resistant Pseudomonos; Cholera and diseases caused by other Vibrio species; Diphtheria; Escherichia coli O157:H7; Hemolytic Uremic Syndrome (HUS) –Post Diarrheal; Listerosis; Measles; Meningococcal infections; Rabies, animal; Rubella; Salmonellosis; Shiga toxin-producing E. coli (STEC); Shigellosis; Tuberculosis; Tularemia; Typhoid fever; Vancomycin-intermediate Staphylococcus aureus; Vancomycin-resistant Staphylococcus aureus; and	Carbapenem-resistant – Acinetobacter; Carbapenem-resistant – Enterobacteriaceae (CRE); Carbapenem-resistant – Pseudomonas; Vancomycin-intermediate Staphylococcus aureus (VISA); and Vancomycin-resistant Staphylococcus aureus (VRSA). (Refer to 902 KAR 2:020 for details.) Notification of the following diseases or conditions shall be made within three (3) months of diagnosis: Asbestosis; Coal worker's pneumoconiosis; or	results whether reported as positive or negative; a. Include the serum bilirubin levels taken within ten (10) days of thetest of a patient who has tested positive; or b. Include the serum alanine aminotransferase levels taken withinten (10) days of the test of a patient who tested positive; and 2. Varicella laboratory test results reported as positive for: a. Isolation of varicella virus from a clinical specimen; b. Varicella antigen detected by direct fluorescent antibody test; or c. Varicella-specific nucleic acid detected by polymerase chain reaction (PCR); 3. Multi-drug Resistant Organisms: a. Clostridioides (Formerly Clostridium) difficile (C. difficile) b. Enterobacteriaceae species resistant to ceftazidime, ceftriaxone, or cefotaxime; c. Methicillin-resistant Staphylococcus aureus (MRSA); and d. Vancomycin resistant Enterococcus species (VRE).	 caused by a biological agent; Submission of a specimen to the Kentucky Division of Laboratory Services for select agent identification or select agent confirmation testing; or An outbreak of a disease or condition that resulted in multiple hospitalizations or death. 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 newly-recognized infectious agent; An outbreak; An emerging pathogen which maypose a danger to the health of thepublic; An epidemic; or A non-infectious chemical, biological, or radiological