2018 List of Reportable Diseases in Tennessee

For Healthcare Providers

The diseases, events, and conditions reportable to Tennessee Department of Health (TDH) by healthcare providers are listed below for 2018. Laboratories in healthcare facilities should refer to Page 2 of this document. The reporting form (PH-1600) and associated documentation may be faxed directly to the local or regional health office (see https://www.tn.gov/health/health-program-areas/localdepartments.html) or the Communicable and Environmental Diseases and Emergency Preparedness (CEDEP) Division at (615) 741-3857. The PH-1600 also is available for completion online at https://redcap.health.tn.gov/redcap/surveys/?s=XTJTN4MD3D. More information about reporting is available on the Reportable Diseases website at https://apps.health.tn.gov/ReportableDiseases. For questions, contact CEDEP at (615) 741-7247 or (800) 404-3006.

Disease Outbreaks (e.g., foodborne, healthcare-associated, waterborne)!

- Anaplasmosis
- Anthrax
- Babesiosis
- Birth Defects
- Botulism: Foodborne
- Botulism: Infant
- Brucellosis
- California/LaCrosse Serogroup Virus Infection
- Campylobacteriosis
- Candida auris (includes rule-out)
- Carbapenem-Resistant Enterobacteriaceae (all genera)
- Carbon Monoxide Poisoning
- Chagas Disease
- Chikungunya
- Chlamydia
- Cholera
- Colistin-Resistant (Plasmid-Mediated) Gram Negative Bacteria
- Congenital Rubella Syndrome
- Cryptosporidiosis
- Cyclosporiasis
- Dengue
- Diptheria
- Ehrlichiosis (including E. chaffeensis and E. ewingii)
- Equine Encephalitis Viruses: Eastern, Venezuelan, Western
- Gonorrhea
- Group A Streptococcal Invasive Disease (Streptococcus pyogenes)
- Group B Streptococcal Invasive Disease (Streptococcus agalactiae)
- Haemophilus influenzae Invasive Disease
- Hansen's Disease (Leprosy)
- Healthcare Associated Infections: NSN
- Catheter-Associated Urinary Tract Infections
- Central Line Associated Bloodstream Infections
- Clostridium difficile
- Dialysis Events
- Healthcare Personnel Influenza Vaccination
- Methicillin-Resistant Staphylococcus aureus
- Surgical Site Infections
- Ventilator Associated Events
- Hemolytic Uremic Syndrome
- Hepatitis, Viral - Type A
- Hepatitis, Viral - Type B: Acute
- Hepatitis, Viral - Type B: Perinatal (age ≤24 months), Pregnant Female (each pregnancy)
- Hepatitis, Viral - Type C: Acute
- Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
- Influenza-Associated Deaths: Age <18 Years, Pregnancy-Associated
- Influenza A: Novel
- Lead Levels
- Legionellosis
- Lyme Disease
- Malaria
- Measles
- Meningitis: Other Bacterial
- Meningococcal Disease (Neisseria meningitidis)
- Middle East Respiratory Syndrome
- Mumps
- Neonatal Abstinence Syndrome
- Nontuberculous Mycobacteria Infection (extra-pulmonary only)
- Pertussis
- Plague
- Poliomyelitis
- Psittacosis
- Q Fever
- Rabies: Animal, Human
- Ricin Poisoning
- Rubella
- St. Louis Encephalitis Virus Infection
- Salmonellosis: Typhoid Fever
- Salmonellosis: All other species
- Shiga toxin-producing Escherichia coli
- Shigellosis
- Smallpox
- Spotted Fever Rickettsiosis
- Staphylococcus aureus: Enterotoxin B
- Pulmonary Poisoning
- Staphylococcus aureus: Vancomycin Non-Sensitive (All Forms)
- Streptococcus pneumoniae Invasive Disease
- Syphilis: Congenital
- Syphilis: Other
- Tetanus
- Toxic Shock Syndrome: Staphylococcal, Streptococcal
- Tuberculosis, infection ("latent")
- Tuberculosis, suspected or confirmed active disease
- Tularemia
- Vancomycin-Resistant Enterococcus Invasive Disease
- Varicella Deaths
- Vibriosis
- Viral Hemorrhagic Fever
- West Nile Virus Infection: Encephalitis, Fever
- Yellow Fever
- Yersiniosis
- Zika Virus Disease/Infection

* Healthcare providers should only report "Tuberculosis, infection" (formerly, "latent" TBI) for a positive tuberculin skin test (TST) for any child or adolescent < 18 years of age, or a positive interferon-gamma release assay (IGRA) for a patient of any age. Refer to the PH-1600 for additional directions on how to report.

Regular Reporting:

- PH-1600 only in 1 week (all diseases for Regular Reporting)
- Phone immediately + PH-1600 in 1 week
- Phone next business day to + PH-1600 in 1 week

Special Reporting:

- All blood lead test results must be reported electronically or via fax. For more information, refer to https://www.tn.gov/health/health-program-areas/mch-lead/for-providers.html or email UT Extension at leadtrk@utk.edu for assistance.
- Report in 30 days. For more information, see https://www.tn.gov/health/cedep/ha.html
- Neonatal Abstinence Syndrome in 1 month at https://www.tn.gov/health/nas.html
- Birth Defects in 1 week at https://tdhc.health.tn.gov/redcap/surveys/?s=TDEYPVCHET

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