

NOTIFIABLE DISEASES AND CONDITIONS LIST

Conditions are reportable **immediately** by telephone at 1-800-821-5821 (24 hours a day) on recognition or strong suspicion of disease
All others are reportable by electronic lab report within **48 hours** of recognition or strong suspicion of disease

→ Directors of laboratories are to submit isolates or clinical specimens, as well as any isolates or clinical specimens as requested by Maine CDC, to the *Maine Health and Environmental Testing Laboratory* for confirmation, typing, and/or antibiotic sensitivity

Acquired Immunodeficiency Syndrome (AIDS)	Listeriosis → <input checked="" type="checkbox"/> (<i>Listeria monocytogenes</i>)	
Acute flaccid myelitis (AFM) ¹	Lyme Disease	
Anaplasmosis	Malaria	
Anthrax → <input checked="" type="checkbox"/> (<i>Bacillus anthracis</i>)	Measles → <input checked="" type="checkbox"/> (Rubeola virus)	
Babesiosis	Meningococcal Disease, invasive → <input checked="" type="checkbox"/> (<i>Neisseria meningitidis</i>)	
Botulism → <input checked="" type="checkbox"/> (<i>Clostridium botulinum</i>)	Mpox virus infection	
Brucellosis → <input checked="" type="checkbox"/> (<i>Brucella</i> species)	Mumps → <input checked="" type="checkbox"/>	
California Serogroup Virus Diseases → <input checked="" type="checkbox"/>	Per and polyfluoroalkyl substances (PFAS) detectable in serum ¹⁰	
Campylobacteriosis	Pertussis	
Candida auris ² → <input checked="" type="checkbox"/>	Plague → <input checked="" type="checkbox"/> (<i>Yersinia pestis</i>)	
Carbapenamase-Producing organisms ³ → <input checked="" type="checkbox"/>	Poliomyelitis → <input checked="" type="checkbox"/> (Polio virus)	
Carbon monoxide poisoning ⁴	Powassan Virus → <input checked="" type="checkbox"/>	
Chancroid	Psittacosis	
Chlamydia	Q Fever	
Chickenpox (Varicella)	Rabies (human and animal) → <input checked="" type="checkbox"/> (Rabies virus)	
Chikungunya	Ricin Poisoning → <input checked="" type="checkbox"/>	
Coronavirus (Novel, MERS, and SARS) → <input checked="" type="checkbox"/>	Rubella (including congenital) → <input checked="" type="checkbox"/> (Rubella virus)	
Coronavirus Disease 2019 (COVID-19)	Salmonellosis → <input checked="" type="checkbox"/> (<i>Salmonella</i> species)	
Creutzfeldt-Jakob Disease (CJD), <55 years of age	Shellfish Poisoning	
Cryptosporidiosis	Shigellosis → <input checked="" type="checkbox"/> (<i>Shigella</i> species)	
Cyclosporiasis	Smallpox → <input checked="" type="checkbox"/> (Variola virus)	
Dengue	Spotted Fever Rickettsiosis (SFR)	
Diphtheria → <input checked="" type="checkbox"/> (<i>Corynebacterium diphtheriae</i>)	St. Louis Encephalitis	
E. coli, Shiga toxin-producing (STEC) → <input checked="" type="checkbox"/>	Staphylococcus aureus non-susceptible to Vancomycin (VRSA) only if MIC≥8µg/ml ⁶ → <input checked="" type="checkbox"/>	
Eastern Equine Encephalitis (EEE) → <input checked="" type="checkbox"/>	Streptococcus Group A, invasive	
Ehrlichiosis	Streptococcus pneumoniae, invasive	
Enterococcus spp. resistant to daptomycin, linezolid, and vancomycin (DLVRE) ⁵ → <input checked="" type="checkbox"/>	Syphilis	
Enterococcus spp. resistant to linezolid and vancomycin (LVRE) ⁶ → <input checked="" type="checkbox"/>	Tetanus → <input checked="" type="checkbox"/> (<i>Clostridium tetani</i>)	
Giardiasis	Trichinosis	
Gonorrhea	Tuberculosis (active and presumptive) → <input checked="" type="checkbox"/> (<i>Mycobacterium tuberculosis</i>)	
Haemophilus influenzae, invasive → <input checked="" type="checkbox"/>	Tularemia → <input checked="" type="checkbox"/> (<i>Francisella tularensis</i>)	
Hantavirus, pulmonary and non-pulmonary syndromes → <input checked="" type="checkbox"/>	Vibrio species, including Cholera → <input checked="" type="checkbox"/> (<i>Vibrio</i> species)	
Hard Tick Relapsing Fever (HTRF)	Vaping-associated pulmonary illness ⁹	
Hemolytic-uremic syndrome (post-diarrheal)	Viral Hemorrhagic Fever	
Hepatitis A, B, C ⁷ , D, E (acute)	West Nile Virus → <input checked="" type="checkbox"/>	
Hepatitis B, C ⁷ , D (chronic)	Western Equine Encephalitis	
Human Immunodeficiency Virus (HIV) ⁸	Yellow Fever	
Influenza-associated pediatric death	Zika	
Influenza A, Novel → <input checked="" type="checkbox"/>	Any Case of Unusual Illness of Infectious Cause	
Influenza-associated hospitalization, laboratory-confirmed	Any Cluster/Outbreak of Illness with Potential Public Health Significance	
Legionellosis	*See condition-specific footnotes on next page.	
Leptospirosis	*See condition-specific footnotes on next page.	

Who must report: Health Care Providers, Medical Laboratories, Health Care Facilities, Child Care Facilities, Correctional Facilities, Educational Institutions, Administrators, Local Health Officers, Veterinarians, Veterinary Medical Laboratories

What to report: Disease reports must include:

- Name of disease or condition and symptom onset
- Name and phone number of person making the report and date
- Patient's name, date of birth, address, phone number, sex, race, and ethnicity

- Diagnostic laboratory findings and dates of test relevant to the notifiable condition
- Health care provider name, address, and phone number

Complete Rules for the Control of Notifiable Diseases and Conditions:

www.maine.gov/dhhs/disease-reporting



NOTIFIABLE DISEASES AND CONDITIONS LIST

Footnotes

1. An illness with an onset of acute focal limb weakness and either 1) cerebrospinal fluid with an elevated white blood cell count or 2) a magnetic resonance image (MRI) showing a spinal cord lesion largely restricted to gray matter and spanning one or more spinal segments.
2. Detection of *Candida auris* in a specimen using culture or culture independent diagnostic test; or detection of an organism that commonly represents a *Candida auris* misidentification.
3. Carbapenemase-producing carbapenem-resistant organisms are:
 - Carbapenem-resistant organisms, as defined by the Clinical Laboratory Standards Institute Performance Standards for Antimicrobial Susceptibility Testing M100 (<http://www.clsi-m100.com>), that test positive for carbapenemase production by a phenotypic method or for one or more carbapenemase resistance mechanisms by a recognized test, as defined by the U.S. Centers for Disease Control and Prevention (<https://www.cdc.gov/hndss/conditions/carbapenemase-producing-carbapenem-resistant-enterobacteriaceae/case-definition/2018/>).
 - Reporting will include test method used, result, and where applicable, specific resistance mechanisms identified.
 - Isolate submission is required for all carbapenem-producing carbapenem-resistant organisms. If phenotypic or resistance mechanism test results are not available for a carbapenem-resistant organism, then isolate submission of the carbapenem-resistant organism is required to determine carbapenemase-producing status.
4. All cases with clinical signs, symptoms or known exposure consistent with diagnosis of carbon monoxide poisoning, and/or: a carboxyhemoglobin (COHb) level equal to or above 10%.
5. *Enterococcus* spp. resistant to daptomycin, linezolid, and vancomycin as defined by the most current Clinical Laboratory Standards Institute Performance Standards for Antimicrobial Susceptibility Testing M100 (<http://www.clsi-m100.com>)
6. *Enterococcus* spp. resistant to linezolid and vancomycin as defined by the most current Clinical Laboratory Standards Institute Performance Standards for Antimicrobial Susceptibility Testing M100 (<http://www.clsi-m100.com>)
7. Any hepatitis C virus (HCV) RNA test results, including:
 - All HCV RNA results (e.g. positive, negative, indeterminate, undetected for both qualitative and quantitative tests) including PCR, bDNA, TMA and Genotype.
 - In addition, Positive serology for anti-HCV (including signal-to-cut-off ratio for EIA, CIA, MEIA, or CMIA); Positive anti-HCV RIBA, and ALT >200 IU/L (in combination with one or more positive or detectable HCV result).
8. Any human immunodeficiency virus (HIV) test results, including:
 - All reactive/repeatedly reactive initial HIV immunoassay results and all results (e.g. positive, negative, indeterminate) from all supplemental HIV immunoassays (HIV-1/2 antibody differentiation assay, HIV-1 Western blot, HIV-2 Western blot or HIV-1 Immunofluorescent assay);
 - All HIV nucleic acid (RNA or DNA) detection tests (qualitative and quantitative), including tests on individual specimens for confirmation of nucleic acid amplification testing (NAAT) screening results;
 - All CD4 lymphocyte counts and percentages, unless known to be ordered for a condition other than HIV;
 - HIV genotypic resistance testing, nucleotide sequence results; and,
 - Positive HIV detection tests (including, but not limited to culture, P24 antigen).
9. Clinicians should report cases that meet the criteria of (1) a significant respiratory illness of unclear etiology and (2) a history of vaping.
10. Any serum test results from a venous blood sample that include a positive detection of:
 - Linear or branched perfluorooctanoic acid (PFOA);
 - Linear or branched perfluorooctanesulfonic acid (PFOS);
 - Perfluororonanoic acid (PFNA);
 - Perfluorohexanesulfonic acid (PFHxS);
 - Perfluoroheptanoic acid (PFHpA); or
 - Perfluorodecanoic acid (PFDA).

If any PFAS is detected in a blood sample, the results for all PFAS testing of the sample must be reported to the Department.