

Laboratory Reporting of Communicable Diseases in Montana

Report Conditions IMMEDIATELY to your Local Public Health Jurisdiction.

Click [HERE](#) to find your local public health department.

If Local Public Health Jurisdiction Unavailable – Call 406.444.0273 24/7/365

All reportable diseases listed below whether suspected or confirmed or any unusual incident of unexplained illness or death in a human or animal with potential human health implications must be reported immediately to your local health jurisdiction.

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| <ul style="list-style-type: none"> Acquired Immune Deficiency Syndrome (AIDS) Anaplasmosis Anthrax ① Arboviral disease (including California serogroup, Eastern equine encephalitis, Powassan, St. Louis encephalitis, West Nile Virus, Western equine encephalitis) Babesiosis Botulism ① Brucellosis ① <i>Campylobacter</i> ① Chancroid <i>Chlamydia trachomatis</i> infection Colorado tick fever Cryptosporidiosis Coccidioidomycosis Cyclosporiasis Dengue virus Diphtheria ① Ehrlichiosis <i>Escherichia coli</i>, shiga-toxin producing (STEC) ① Gastroenteritis outbreak ①¹ Giardiasis Gonorrheal infection ①¹ Granuloma inguinale <i>Haemophilus influenzae</i>, invasive disease ① Hansen's disease Hantavirus Pulmonary Syndrome/infection ① Hemolytic uremic syndrome, post-diarrheal Hepatitis A, acute Hepatitis B, acute, chronic, perinatal Hepatitis C, acute, chronic Human Immunodeficiency Virus (HIV) ① Influenza (including hospitalizations and deaths) ①¹ Lead Poisoning (blood levels ≥ 5 micrograms per deciliter for children 13 years of age or younger) Legionellosis Listeriosis ① | <ul style="list-style-type: none"> Lyme disease Lymphogranuloma venereum Malaria Measles (rubeola) ① Meningococcal disease (<i>Neisseria meningitidis</i>) ① Mumps Pertussis ①¹ Plague (<i>Yersinia pestis</i>) ① Poliomyelitis ① Psittacosis Q Fever (<i>Coxiella burnetii</i>) Rabies human ① and animal (Including exposure to a human by a species susceptible to rabies infection) Rickettsiosis Rubella, including congenital ① Salmonellosis ① Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV) disease ① Shigellosis ① Smallpox ① <i>Streptococcus pneumoniae</i>, invasive disease Streptococcal toxic shock syndrome Syphilis ① Tetanus Tickborne relapsing fever Toxic shock syndrome, non-streptococcal Transmissible spongiform encephalopathies Trichinellosis (Trichinosis) ① Tuberculosis ① Tularemia Typhoid Fever ① Varicella <i>Vibrio cholerae</i> infection (Cholera) ① Vibriosis ① Viral hemorrhagic fevers Yellow fever |
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Additional Laboratory Requirements for submission of Selected Specimens/Reports:

The Montana Department of Public Health & Human Services (DPHHS) requires selected specimens and reports of public health interest to be submitted directly to DPHHS. Specimens or isolates are to be submitted on conditions above that are followed by an “①”. In addition, the list below provides additional detail on other isolates or conditions of public health significance requiring laboratory participation. For additional information contact the [Montana Public Health Laboratory at 1-800-821-7284](#).

Isolates: In addition to selected conditions noted above, suspected or confirmed isolates of Carbapenem-Resistant Enterobacteriaceae (CRE), Vancomycin-intermediate or resistant *Staphylococcus aureus* (VISA or VRSA).

RSV: October 1 through June 1, a summary of the total number of RSV-specific antigen direct detection tests performed, the number of positive tests for each type, and the testing method (rapid or molecular testing) used for each specimen result on a form provided by the department. Forms and information can be obtained by contacting the [Communicable Disease/Epidemiology Program at 444-0273](#).

HIV/AIDS: All test results that confirm HIV infection, all CD4 T-lymphocyte test results with or without confirmed HIV infection unless it is known that the test was performed in association with a disease other than HIV infection, positive p24 antigen assays, HIV nucleic acid viral load tests irrespective of results, positive results for qualitative nucleic acid tests for the detection of HIV infection and all test results for assays designed to assess HIV infection resistance to antiretroviral drugs.

Lead: A laboratory that performs a blood lead analysis must submit to the department, by the 15th day following the month in which the test was performed, a copy of all blood lead analyses performed that month, including analyses in which lead was undetectable.

¹These conditions require submission only when isolates are available or at the initial phase of an outbreak.