

Nebraska Reportable Diseases Title 173 Regulations

Immediate Notification: Douglas Co. (402)444-7214 (after hrs 402- 444-7000)

Lancaster Co (402) 441-8053 (after hrs 402-440-1817) All Other Counties 402-471-1983

Nebraska Public Health Laboratory 24/7 pager 402-888-5588

Updated 10/23/2015 Condition	Labs- automated ELR			Labs reporting manually			Health care providers		
	immediate	within 7 days	monthly	immediate	within 7 days	monthly	immediate	within 7 days	monthly
Antimicrobial Resistance, High Level - ie) Carbapenem Resistant Enterobacteriaceae (CRE)‡	x			x			x		
<i>Acinetobacter</i> spp.		x			x			x	
Acquired Immunodeficiency Syndrome (AIDS), as described in 173 NAC 1-005.01C2		x			x			x	
Adenovirus infection (conjunctivitis, respiratory)		x			x			x	
Amebae-associated infection (<i>Acanthamoeba</i> spp, <i>Entamoeba histolytica</i> , and <i>Naegleria fowleri</i>)		x			x			x	
Anthrax (<i>Bacillus anthracis</i>)* ‡	x			x			x		
Arboviral infections (including, but not limited to, West Nile virus, St. Louis encephalitis virus, Western equine encephalitis virus, and Dengue virus)		x			x			x	
Babesiosis (<i>Babesia</i> species)		x			x			x	
Botulism (<i>Clostridium botulinum</i>)*	x			x			x		
Brucellosis (<i>Brucella abortus</i>^, <i>B. melitensis</i>^, and <i>B. suis</i>)* ‡	x			x			x		
Campylobacteriosis (<i>Campylobacter</i> species) ‡ Do not forward to NPHL for banking or subtyping unless requested.		x			x			x	
Carbon monoxide poisoning (Use break point for non-smokers)		x			x			x	
Chancroid (<i>Haemophilus ducreyi</i>) ‡±		x			x			x	
<i>Chlamydia trachomatis</i> infections (nonspecific urethritis, cervicitis, salpingitis, neonatal conjunctivitis, pneumonia) ‡±		x			x			x	
Cholera (<i>Vibrio cholerae</i>) ‡	x			x			x		
<i>Clostridium difficile</i> ‡		x			x			x	
Coccidiomycosis (<i>Coccidioides immitis/posadasii</i>)	x			x			x		

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Creutzfeldt-Jakob Disease [transmissible spongiform encephalopathy (14-3-3 protein from CSF or any laboratory analysis of brain tissue suggestive of CJD)]		x			x			x	
Cryptosporidiosis (<i>Cryptosporidium parvum</i>) [‡]		x			x			x	
Cyclosporiasis (<i>Cyclospora cayetanensis</i>) [‡]		x			x			x	
Dengue virus infection		x			x			x	
Diphtheria (<i>Corynebacterium diphtheriae</i>) [‡]	x			x			x		
Eastern equine encephalitis (EEE virus)*	x			x			x		
Ehrlichiosis, human granulocytic (<i>Anaplasma phagocytophilum</i>)		x			x			x	
Ehrlichiosis, human monocytic (<i>Ehrlichia chaffeensis</i>) [‡]		x			x			x	
Encephalitis (caused by viral agents)		x			x			x	
Enterocococcus spp., all isolates [‡]		x							
Enterococcus spp., vancomycin-resistant (MIC _≥ 32 mg/mL and/or resistant by disk diffusion) and intermediate (MIC=8-16 mg/mL) [‡]						x			
<i>Escherichia coli</i> gastroenteritis (<i>E. coli</i> O157-H7 and other Shiga toxin-positive <i>E. coli</i> from gastrointestinal infection)		x			x			x	
Food-poisoning, outbreak-associated	x			x			x		
Giardiasis (<i>Giardia lamblia</i>)		x			x			x	
Glanders [<i>Burkholderia (Pseudomonas) mallei</i>]*[‡]	x			x			x		
Gonorrhea (<i>Neisseria gonorrhoeae</i>): venereal infection and ophthalmia neonatorum ^{‡±}		x			x			x	
Haemophilus influenzae infection (invasive disease only) [‡]	x			x			x		
Hansen's Disease [Leprosy (<i>Mycobacterium leprae</i>)] [‡]		x			x			x	
Hantavirus pulmonary syndrome (Sin Nombre virus)	x			x			x		
Hemolytic uremic syndrome (post-diarrheal illness)	x			x			x		
Hepatitis A (IgM antibody-positive or clinically diagnosed during an outbreak)	x			x			x		
Hepatitis B infection (positive surface antigen tests and all IgM core antibody tests, both positive and negative) [±]		x			x			x	

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Hepatitis C (all positive screening tests [e.g. EIA, ELISA, etc] to include signal-to-cutoff ratio [S:CO] are reportable; all confirmatory tests [e.g., RIBA, NAT tests such as PCR for qualitative, quantitative and genotype testing] are reportable regardless of result [i.e., both positive and negatives tests])		x			x			x	
Hepatitis D and E		x			x			x	
Herpes simplex, primary genital infection [±]		x			x			x	
Histoplasmosis (<i>Histoplasma capsulatum</i>)		x			x			x	
Human immunodeficiency virus infection, as described in 173 NAC 1-005.01C2, Type 1 and suspected cases of HIV Type 2 [±]		x			x			x	
Influenza (Antigen or PCR positive or culture confirmed)		x			x			x	
Influenza deaths, pediatric (<18 years of age)		x			x			x	
Influenza due to novel or pandemic strains (includes highly pathogenic avian influenza virus [^])	x			x			x		
Influenza, all tests		x							
Influenza, rapid tests summary report only (laboratories only)		x			x				
Influenza Group A positive by molecular assay (ie. File Array), inconclusive for serotype		x			x		x		
Kawasaki disease (mucocutaneous lymph node syndrome)		x			x			x	
<i>Klebsiella spp.</i>		x							
Lead poisoning (all analytical values for blood lead analysis shall be reported)		x			x				
Legionellosis (<i>Legionella species</i>) [‡]		x			x			x	
Leptospirosis (<i>Leptospira interrogans</i>)		x			x			x	
Listeriosis (<i>Listeria monocytogenes</i>) [‡]		x			x		x		
Lyme disease (<i>Borrelia burgdorferi</i>)		x			x			x	
Lymphocytic choriomeningitis virus infection		x			x			x	
Lymphogranuloma venereum (LGV [<i>Chlamydia trachomatis</i>]) [±]		x			x			x	
Marburg virus*	x			x			x		
Malaria (<i>Plasmodium species</i>)		x			x			x	

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Measles (Rubeola)	x			x			x		
Melioidosis [Burkholderia (Pseudomonas) pseudomallei]* †^	x			x			x		
Meningitis (<i>Haemophilus influenzae</i> ^ or <i>Neisseria meningitidis</i>)	x			x			x		
Meningitis, including viral, bacterial, and fungal (all such cases must be reported within seven days except those caused by <i>Haemophilus influenzae</i> and <i>Neisseria meningitidis</i> , which must be reported immediately)									
Meningococcal disease, invasive (<i>Neisseria meningitidis</i>) [‡]	x			x			x		
Methemoglobinemia/nitrate poisoning (methemoglobin greater than 5% of total hemoglobin)		x			x			x	
Monkeypox virus infection *	x			x			x		
Mumps		x			x			x	
<i>Mycobacterium spp.</i> , invasive infection (including <i>M. tuberculosis</i> complex and atypical <i>Mycobacterium spp.</i> associated with invasive disease) [‡] Send only MTB complex to NPHL		x			x			x	
Necrotizing fasciitis		x			x			x	
Norovirus (laboratories only)		x			x				
Pertussis [whooping cough] (<i>Bordetella pertussis</i>) [‡]	x			x			x		
Plague (<i>Yersinia pestis</i>)* †	x			x			x		
Poisoning or illness due to exposure to chemicals (agricultural: herbicides, pesticides, and fertilizers), industrial chemicals, mercury, radiologic exposures		x			x			x	
Poliomyelitis paralytic	x			x			x		
Psittacosis (<i>Chlamydia psittaci</i>)		x			x			x	
Q fever (<i>Coxiella burnetii</i>)* †	x			x			x		
Rabies, (human and animal cases and suspects)	x			x			x		
Respiratory syncytial virus infection, all tests (laboratories only)		x			x				
Retrovirus infections (other than HIV)		x			x			x	
Rheumatic fever, acute (cases meeting the Jones criteria only)		x			x			x	
Ricin poisoning*	x			x			x		

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Rift Valley Fever*	X			X			X		
Rocky Mountain Spotted Fever (<i>Rickettsia rickettsii</i> ^)*	X			X			X		
Rotavirus (all positive and negative tests)		X							
Rubella and congenital rubella syndrome	X			X			X		
Salmonellosis, including typhoid fever (<i>Salmonella</i> serogroups) †		X			X			X	
Severe Acute Respiratory Syndrome [SARS] (SARS-associated coronavirus)	X			X			X		
Shiga toxin positive gastroenteritis (enterohemorrhagic E coli and other shiga toxin-producing bacteria)		X			X			X	
Shigellosis (<i>Shigella</i> species) † Forward all species except <i>S. sonnei</i> or isolates requiring serogrouping to NPHL. Notify NPHL if speciated as <i>S. dysenteriae</i> for special shipping requirements..		X			X			X	
Smallpox^*	X			X			X		
Staphylococcal enterotoxin B intoxication* †	X			X			X		
<i>Staphylococcus aureus</i> (all isolates)		X							
<i>Staphylococcus aureus</i> , methicillin-resistant (MIC>=4mg/mL and/or resistant by disk diffusion) †						X			
<i>Staphylococcus aureus</i> , vancomycin-intermediate/resistant (MIC>=4mg/mL) †	X			X			X		
Streptococcal disease (all invasive disease caused by Groups A and B streptococci) †		X			X			X	
<i>Streptococcus pneumoniae</i> , penicillin-intermediate (MIC=0.12-1.0 mg/mL) and penicillin-resistant (MIC>=2.0 mg/mL) †						X			
<i>Streptococcus pneumoniae</i> (Sterile Body Sites) †		X							
Syphilis (<i>Treponema pallidum</i>) RPR and FTA †		X			X			X	
Syphilis, congenital		X			X			X	
Tetanus (<i>Clostridium tetani</i>) †		X			X			X	

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Tick-borne encephalitis, virus complexes (Central European Tick-borne encephalitis virus, Far Eastern Tick-borne encephalitis virus, Kyasanur Forest disease virus, Omsk Hemorrhagic Fever virus, Russian Spring and Summer encephalitis virus)*	x			x			x		
Toxic Shock Syndrome		x			x			x	
Toxoplasmosis, acute (<i>Toxoplasma gondii</i>)		x			x			x	
Transmissible spongiform encephalopathies		x			x			x	
Trichinosis (<i>Trichinella spiralis</i>)		x			x			x	
Tuberculosis (to include all <i>M. tuberculosis</i> complex organisms [for genotyping]; culture or nucleic acid test positive or positive histological evidence indicative of tuberculosis infection)		x			x			x	
Tularemia (<i>Francisella tularensis</i>)* †	x			x			x		
Typhus Fever, louse-borne (<i>Rickettsia prowazekii</i> ^)* and flea-borne/ endemic murine (<i>Rickettsia typhi</i>)	x			x			x		
Varicella primary infections (chicken pox)		x			x			x	
Varicella mortality (all ages)		x			x			x	
Venezuelan equine encephalitis*	x			x			x		
<i>Vibrio ssp.</i> ‡	x								
Viral hemorrhagic fever (including but not limited to Ebola virus, Marburg virus, and Lassa fever virus)*	x			x			x		
Yellow Fever	x			x			x		
Yersiniosis (<i>Yersinia</i> species not <i>Y. pestis</i>) ‡		x			x			x	
* Potential agents of bioterrorism (Designated as select agents by CDC)									
Immediate Notification for automated ELR Labs - Required to call by telephone to a live public health surveillance official within 24 hours of detection									
Immediate Notification for Labs reporting manually - Required to call by telephone to a live public health surveillance official within 24 hours of detection									
Laboratories where the specimen originated, must submit the isolate and/or specimen within 7 days to the Nebraska Public Health Lab as specified in Title 173 NAC 1-007.03									
‡ Laboratories performing electronic lab reporting as specified in 173 NAC 1-005.02C must report any antibiotic susceptibility test results									

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± STD in accordance with Neb. Rev. Stat. § 71-502.01									