

REPORTABLE LABORATORY FINDINGS – 2023

The director of a clinical laboratory must report laboratory evidence suggestive of reportable diseases (see page 4 for additional information). The Laboratory Report of Significant Findings form (OL-15C) can be found on the DPH "Forms" webpage. Changes for 2023 are in bold font.

*Anaplasma phagocytophilum* by PCR only  
*Babesia*:  IFA IgM (titer) \_\_\_\_\_ IgG (titer) \_\_\_\_\_  
 Blood smear  PCR  Other \_\_\_\_\_  
 *microti*  *divergens*  *duncani*  Unspiciated  
*Bordetella pertussis* (titer) \_\_\_\_\_  
 Culture (1)  Non-pertussis *Bordetella* (1) (specify) \_\_\_\_\_  
 DFA  PCR  
*Borrelia burgdorferi*  
*Borrelia miyamotoi*  
 California group virus (2) spp \_\_\_\_\_  Culture  PCR  EIA  
*Campylobacter* (2) spp \_\_\_\_\_  Culture  PCR  EIA  
*Candida auris* [report samples from all sites] (1) \_\_\_\_\_ (1,2)  
*Candida* spp. [blood isolates only]: \_\_\_\_\_ (1,3)  
 Carbapenem-resistant *Acinetobacter baumannii* (CRAB) (1,3)  
 Carbapenem-resistant Enterobacteriaceae (CRE) (1,2,3)  
 Genus \_\_\_\_\_ spp \_\_\_\_\_  
 Carbapenem-resistant *Pseudomonas aeruginosa* (CRPA) (1,3)  
 Carboxyhemoglobin  $\geq$  5% \_\_\_\_\_ % COHb  
 Chikungunya virus  
*Chlamydia trachomatis* (test type) \_\_\_\_\_  
*Clostridium difficile* (4)  
*Corynebacterium diphtheria* (1)  
*Cryptosporidium* spp (2) \_\_\_\_\_  PCR  DFA  EIA  
 Microscopy  Other: \_\_\_\_\_  
*Cyclospora* spp (2) \_\_\_\_\_  PCR  Microscopy  Other: \_\_\_\_\_  
 Dengue virus  
 Eastern equine encephalitis virus  
*Ehrlichia chaffeensis*  PCR  IgG titers  $\geq$  1:128 only  Culture  
 Enterotoxigenic *Escherichia coli* (ETEC)  Culture  PCR  
*Escherichia coli* O157 (1)  Culture  PCR  
*Giardia* spp (2) \_\_\_\_\_  Culture  Other \_\_\_\_\_  
 Group A *Streptococcus*, invasive (1,3)  Culture  Other \_\_\_\_\_  
 Group B *Streptococcus*, invasive (1,3)  Culture  Other \_\_\_\_\_  
*Haemophilus ducreyi*  
*Haemophilus influenzae*, invasive (1,3)  Culture  Other \_\_\_\_\_  
 Hepatitis A virus (HAV):  IgM anti-HAV (7)  NAAT Positive (5)  
 ALT \_\_\_\_\_ Total Bilirubin \_\_\_\_\_  Not Done  
 Hepatitis B HBsAg  Positive  Negative (6)  
 IgM anti-HBc  HBcAg  HBV DNA  
 anti-HBs (6)  Positive (titer) \_\_\_\_\_  Negative  
 Hepatitis C virus (HCV) (7)  Antibody  
 PCR/NAAT/RNA \_\_\_\_\_  Genotype specify \_\_\_\_\_  
 Herpes simplex virus (infants  $\leq$  60 days of age)  
 Culture  PCR  IFA  Ag detection  
 HIV Related Testing (report only to the State) (8)  
 Detectable Screen (IA)  
 Antibody Confirmation (WB/IFA/Type-diff) (8)  
 HIV 1  Positive  Neg/Ind HIV 2  Positive  Neg/Ind  
 HIV NAAT (or qualitative RNA)  Detectable  Not Detectable  
 HIV Viral Load (all results) (8) \_\_\_\_\_ copies/mL  
 HIV genotype (8)  
 CD4 count: \_\_\_\_\_ cells/uL; \_\_\_\_\_ % (8)  
 HPV (report only to the State) (10)  
 Biopsy proven  CIN 2  CIN 3  AIS  
 or their equivalent, (specify) \_\_\_\_\_  
 Influenza virus: (report only to State)  Rapid antigen  RT-PCR  
 Type A  Type B  Type Unknown  
 Subtype \_\_\_\_\_  
 Lead poisoning (blood lead  $\geq$  3.5  $\mu$ g/dL <48 hrs; 0-3.5  $\mu$ g/dL monthly) (11)  
 Finger stick level \_\_\_\_\_  $\mu$ g/dL  Venous level \_\_\_\_\_  $\mu$ g/dL  
*Legionella* spp (1)  
 Culture  DFA  Ag positive  
 Four-fold serologic change (titers) \_\_\_\_\_  
*Listeria monocytogenes* (1)  Culture  PCR

Mercury poisoning  
 Urine  $\geq$  35  $\mu$ g/g creatinine \_\_\_\_\_  $\mu$ g/g  
 Blood  $\geq$  15  $\mu$ g/L \_\_\_\_\_  $\mu$ g/L  
 Monkeypox virus  PCR  Igm anti-MPXV  Sequencing  
 Orthopoxvirus  PCR  IHC  Sequencing  
 Non-variola orthopoxvirus  PCR  PCR  
 Mumps virus (11) (titer) \_\_\_\_\_  PCR  
*Mycobacterium leprae*  
*Mycobacterium tuberculosis* Related Testing (1)  
 AFB Smear  Positive  Negative  
 If positive  Rare  Few  Numerous  
 NAAT  Positive  Negative  Indeterminate  
 Culture  *Mycobacterium tuberculosis*  
 Non-TB mycobacterium. (specify *M.* \_\_\_\_\_)  
*Neisseria gonorrhoeae* (test type) \_\_\_\_\_  
*Neisseria meningitidis*, invasive (1,3)  
 Culture  Other \_\_\_\_\_  
 Neonatal bacterial sepsis (3,12) Genus \_\_\_\_\_ spp \_\_\_\_\_  
*Plasmodium* (1,2) spp \_\_\_\_\_  
 Poliovirus  
 Powassan virus  
 Rabies virus  
*Rickettsia rickettsia*  PCR  IgG titers  $\geq$  1:128 only  Culture  
 Respiratory syncytial virus  
 Rubella virus (11) (titer) \_\_\_\_\_  PCR  
 Rubeola virus (Measles) (11) (titer) \_\_\_\_\_  PCR  
 St. Louis encephalitis virus  
*Salmonella* (1,2) (serogroup & type) \_\_\_\_\_  Culture  PCR  
 SARS-CoV (1)  IgM/IgG  
 PCR  Other \_\_\_\_\_  
 SARS-CoV-2  PCR  Antigen  
 Shiga toxin (1)  Stx1  Stx2  Type Unknown  
 PCR  EIA  
*Shigella* (1,2) (serogroup/spp) \_\_\_\_\_  Culture  PCR  
*Staphylococcus aureus*, invasive (4)  Culture  Other \_\_\_\_\_  
 methicillin-resistant  methicillin-sensitive  
*Staphylococcus aureus*, vancomycin MIC  $\geq$  4  $\mu$ g/mL (1)  
 MIC to vancomycin \_\_\_\_\_  $\mu$ g/mL  
*Staphylococcus epidermidis*, vancomycin MIC  $\geq$  32  $\mu$ g/mL (1)  
 MIC to vancomycin \_\_\_\_\_  $\mu$ g/mL  
*Streptococcus pneumoniae*  
 Culture (1,3)  Urine antigen  Other (4) \_\_\_\_\_  
*Treponema pallidum*  RPR (titer) \_\_\_\_\_  FTA  EIA  
 VDRL (titer) \_\_\_\_\_  TPPA  
*Trichinella*  
 Varicella-zoster virus  
 Culture  PCR  DFA  Other \_\_\_\_\_  
*Vibrio* (1,2) spp \_\_\_\_\_  Culture  PCR  
 West Nile virus  
 Yellow fever virus  
*Yersinia*, not *pestis* (1,2) spp \_\_\_\_\_  Culture  PCR  
 Zika virus  
 BIOTERRORISM AGENTS at first clinical suspicion (13)  
*Bacillus anthracis* (1) *Brucella* spp (1)  
*Burkholderia mallei* (1) *Burkholderia pseudomallei* (1)  
*Clostridium botulinum* *Coxiella burnetii*  
*Francisella tularensis* Ricin  
*Staphylococcus aureus* - enterotoxin B Variola virus (1)  
 Venezuelan equine encephalitis virus *Yersinia pestis* (1)  
 Viral agents of hemorrhagic fevers

- Send isolate/specimen to DPH Laboratory. Send laboratory report (electronic or paper) on first identification of an organism. For CRE/CRAB, and CRPA, send laboratory report if carbapenem resistance is suggested by laboratory antimicrobial testing; include antimicrobial test results with report. For GBS, send isolate for cases <1 year of age. For *Salmonella*, *Shigella*, *Vibrio*, and *Yersinia* (not *pestis*) tested by non-culture methods, send isolate if available; send stool specimen if no isolate available. For Shiga toxin-related disease, send positive broth or stool specimen.
- Specify species/serogroup/serotype.
- Sterile site: sterile fluids (blood, CSF, pericardial, pleural, peritoneal, joint, or vitreous), bone, internal body site (lymph node, brain, heart, liver, spleen, kidney, pancreas, or ovary), or other normally sterile site including muscle. For CRE, CRAB, and CRPA also include urine or sputum; for CRAB and CRPA also include wounds.

- Upon request from the DPH, report all *C. difficile* positive stool samples.
- Report peak ALT and Total Bilirubin results if conducted within one week of HAV positive test, if available. Otherwise, check "Not Done".
- Negative HBsAg and all anti-HBs results only reportable for children  $\leq$  2 years old.
- Report positive Antibody, and all RNA and Genotype results. Negative RNA results only reportable by electronic reporting.
- Report all positive HIV antibody, antigen, viral load, and qualitative NAAT results. HIV genotype (DNA sequence) and CD4 results are only reportable by electronic file reporting.
- Upon request from the DPH, send fixed tissue from the diagnostic specimen for HPV typing.

- Report results  $\geq$  3.5  $\mu$ g/dL within 48 hours to the Local Health Department and DPH; submit ALL lead results at least monthly to DPH only.
- Report all IgM positive titers, only report IgG titers considered significant by laboratory performing the test.
- Report all bacterial isolates from blood or CSF from infants  $\leq$  72 hours of age.
- Call the DPH, weekdays 860-509-7994; evenings, weekends, and holidays 860-509-8000.