

Protocol for Public Health Agencies to Notify CDC about the Occurrence of Nationally Notifiable Conditions, 2026

Categorized by Notification Timeliness

IMMEDIATELY NOTIFIABLE, EXTREMELY URGENT: Call the CDC Emergency Operations Center (EOC) at 770.488.7100 within 4 hours of a case meeting the notification criteria, followed by submission of an electronic case notification to CDC by the next business day.

ROUTINELY NOTIFIABLE: Submit electronic case notification within the next reporting cycle.

IMMEDIATELY NOTIFIABLE, URGENT: Call the CDC EOC at 770.488.7100 within 24 hours of a case meeting the notification criteria, followed by submission of an electronic case notification in next regularly scheduled electronic transmission.

Approved by CSTE: June 2025
Implemented: January 1, 2026
Updated: January 2, 2026

The notification timeliness is determined based on the most recently approved Council of State and Territorial Epidemiologists (CSTE) Position Statements.

Condition	Notification Timeliness	Cases Requiring Notification
Immediately notifiable, extremely urgent (within 4 hours)		
Anthrax¹ <ul style="list-style-type: none"> - Source of infection not recognized - Recognized bioterrorism exposure/potential mass exposure - Serious illness of naturally-occurring anthrax 	Immediately notifiable, extremely urgent	Confirmed and probable cases
Botulism <ul style="list-style-type: none"> - Foodborne (except endemic to Alaska) - Intentional or suspected intentional release - Infant botulism (clusters or outbreaks) - Cases of unknown etiology/not meeting standard notification criteria 	Immediately notifiable, extremely urgent	All cases prior to classification
Plague <ul style="list-style-type: none"> - Suspected intentional release 	Immediately notifiable, extremely urgent	All cases prior to classification
SARS-associated coronavirus	Immediately notifiable, extremely urgent	All cases prior to classification
Smallpox	Immediately notifiable, extremely urgent	Confirmed and probable cases
Tularemia <ul style="list-style-type: none"> - Suspected intentional release 	Immediately notifiable, extremely urgent	Confirmed, probable, and suspected cases
Viral hemorrhagic fevers² <ul style="list-style-type: none"> - Suspected intentional release for suspected and confirmed cases 	Immediately notifiable, extremely urgent	Confirmed and suspected cases
Immediately notifiable, urgent (within 24 hours)		
Anthrax¹ <ul style="list-style-type: none"> - Naturally-occurring or occupational, responding to treatment 	Immediately notifiable, urgent	Confirmed and probable cases
Brucellosis <ul style="list-style-type: none"> - Multiple cases, temporally/spatially clustered 	Immediately notifiable, urgent	Confirmed and probable cases
Cronobacter invasive infection, infants	Immediately notifiable, urgent	Confirmed and probable cases
Diphtheria	Immediately notifiable, urgent	Confirmed cases
Novel influenza A virus infection	Immediately notifiable, urgent	Confirmed and probable cases

Condition	Notification Timeliness	Cases Requiring Notification
Measles	Immediately notifiable, urgent	Confirmed cases
Melioidosis	Immediately notifiable, urgent	Confirmed and probable cases
Mpox	Immediately notifiable, urgent	Confirmed and probable cases
Paralytic poliomyelitis	Immediately notifiable, urgent	Confirmed cases
Poliovirus infection, nonparalytic	Immediately notifiable, urgent	Confirmed cases
Rabies, animal <ul style="list-style-type: none"> - In compliance with international reporting regulations, animal rabies cases meeting the criteria specified below are designated as immediately notifiable urgent conditions requiring notification to CDC of confirmed cases within 24 hours of identification: <ul style="list-style-type: none"> • Detection of a case of rabies or non-rabies lyssavirus occurring in an animal imported from outside the continental U.S. within the previous 365 days, unless variant testing identifies a variant known to circulate in the U.S. • Detection of a rabies virus variant or non-rabies virus lyssavirus in a new geographic area as determined by the jurisdiction. • Identification of sustained transmission of any rabies virus variant or non-rabies lyssavirus among animals of a previously unrecognized reservoir species for that virus or virus variant. 	Immediately notifiable, urgent	Confirmed cases
Rabies, human	Immediately notifiable, urgent	Confirmed cases
Rubella	Immediately notifiable, urgent	Confirmed cases
Viral hemorrhagic fevers² <ul style="list-style-type: none"> - All suspected and confirmed cases other than suspected intentional 	Immediately notifiable, urgent	Confirmed and suspected cases
Routinely notifiable		
Anaplasmosis	Routinely notifiable	Confirmed and probable cases
Arboviral diseases³	Routinely notifiable	Confirmed and probable cases
Babesiosis	Routinely notifiable	Confirmed and probable cases
Botulism <ul style="list-style-type: none"> - Infant, sporadic cases - Wound, sporadic cases 	Routinely notifiable	All cases prior to classification

Condition	Notification Timeliness	Cases Requiring Notification
Brucellosis - Cases not temporally/spatially clustered	Routinely notifiable	Confirmed and probable cases
Campylobacteriosis	Routinely notifiable	Confirmed and probable cases
Cancer⁴	Routinely notifiable	Confirmed cases
<i>Candida auris</i>, clinical	Routinely notifiable	Confirmed cases
<i>Candida auris</i>, screening	Routinely notifiable	Confirmed cases
Carbapenemase-Producing Organisms (CPO), clinical	Routinely notifiable	Confirmed cases
Carbapenemase-Producing Organisms (CPO), screening	Routinely notifiable	Confirmed cases
Chancroid	Routinely notifiable	Confirmed and probable cases
<i>Chlamydia trachomatis</i> infection	Routinely notifiable	Confirmed cases
Coccidioidomycosis⁵	Routinely notifiable	Confirmed and probable cases
COVID-19-associated pediatric mortality	Routinely notifiable	Confirmed cases
Cryptosporidiosis	Routinely notifiable	Confirmed and probable cases
Cyclosporiasis	Routinely notifiable	Confirmed and probable cases
Dengue virus infections⁶	Routinely notifiable	Confirmed, probable, and suspected cases
Ehrlichiosis	Routinely notifiable	Confirmed and probable cases
<i>Escherichia coli</i>, Shiga toxin-producing (STEC)	Routinely notifiable	Confirmed and probable cases
Foodborne disease outbreaks⁷	Routinely notifiable	Confirmed outbreaks
Giardiasis	Routinely notifiable	Confirmed and probable cases
Gonorrhea	Routinely notifiable	Confirmed and probable cases
<i>Haemophilus influenzae</i>, invasive disease	Routinely notifiable	All cases prior to classification
Leprosy (Hansen's disease)	Routinely notifiable	Confirmed and probable cases
Hantavirus pulmonary syndrome	Routinely notifiable	Confirmed cases
Hemolytic uremic syndrome, post-diarrheal	Routinely notifiable	Confirmed and probable cases
Hepatitis A, acute	Routinely notifiable	Confirmed cases
Hepatitis B, acute	Routinely notifiable	Confirmed and probable cases
Hepatitis B, chronic	Routinely notifiable	Confirmed and probable cases
Hepatitis B, perinatal infection	Routinely notifiable	Confirmed cases
Hepatitis C, acute	Routinely notifiable	Confirmed and probable cases
Hepatitis C, chronic	Routinely notifiable	Confirmed and probable cases

Condition	Notification Timeliness	Cases Requiring Notification
Hepatitis C, perinatal infection	Routinely notifiable	Confirmed cases
HIV infection	Routinely notifiable	Confirmed cases of HIV infection; perinatally exposed infants prior to classification
Influenza-associated mortality, pediatric	Routinely notifiable	Confirmed cases
Invasive pneumococcal disease (IPD)	Routinely notifiable	Confirmed and probable cases
Lead in blood	Routinely notifiable	Confirmed cases
Legionellosis	Routinely notifiable	Confirmed cases
Leptospirosis	Routinely notifiable	Confirmed and probable cases
Listeriosis	Routinely notifiable	Confirmed and probable cases
Lyme disease⁸	Routinely notifiable	Confirmed and probable cases
Malaria	Routinely notifiable	Confirmed and suspected cases
Meningococcal disease (<i>Neisseria meningitidis</i>)	Routinely notifiable	Confirmed and probable cases
Mumps	Routinely notifiable	Confirmed and probable cases
Oropouche		
Oropouche, congenital	Routinely notifiable	Confirmed and probable cases
Oropouche, non-congenital	Routinely notifiable	Confirmed and probable cases
Pertussis	Routinely notifiable	All cases prior to classification
Pesticide-related illness, acute (non-occupational and occupational)	Routinely notifiable	Definite, probable, possible, and suspicious cases
Plague - All cases not suspected to be intentional	Routinely notifiable	All cases prior to classification
Psittacosis	Routinely notifiable	Confirmed and probable cases
Q Fever (acute and chronic)	Routinely notifiable	Confirmed and probable cases

Condition	Notification Timeliness	Cases Requiring Notification
Rabies, animal <ul style="list-style-type: none"> - Other cases are designated as a routinely notifiable, requiring notification to CDC of confirmed cases meeting the case definition by the next electronic reporting cycle in the following circumstances: <ul style="list-style-type: none"> • Routine (standard) notification of positive and negative animal rabies test results to CDC for all situations that do not meet the criteria for immediate notification. Routine notification should occur no less frequently than monthly. • Negative results from certain laboratory tests (direct fluorescent antibody, direct rapid immunohistochemical (dRIT), immunohistochemistry (IHC) on formalin-fixed tissues and pan-lyssavirus real-time RT-PCR) should also be included in the notification. 	Routinely notifiable	Confirmed cases
Rickettsiosis, Spotted Fever	Routinely notifiable	Confirmed and probable cases
Rubella, congenital syndrome	Routinely notifiable	Confirmed cases
<i>Salmonella enterica</i> serotypes Paratyphi A, B (tartrate negative) and C (<i>S. Paratyphi</i> infection)	Routinely notifiable	
<i>Salmonella enterica</i> Typhi (<i>S. Typhi</i>) infection	Routinely notifiable	Confirmed and probable cases
Salmonellosis (excluding <i>S. Typhi</i> infection and <i>S. Paratyphi</i> infection)	Routinely notifiable	Confirmed and probable cases
Shigellosis	Routinely notifiable	Confirmed and probable cases
Silicosis	Routinely notifiable	Confirmed cases
<i>Staphylococcus aureus</i> infection <ul style="list-style-type: none"> - Vancomycin-intermediate (VISA) - Vancomycin-resistant (VRSA) 	Routinely notifiable	Confirmed cases
Streptococcal toxic-shock syndrome (STSS)	Routinely notifiable	Confirmed and probable cases
Syphilis		
Syphilis, primary	Routinely notifiable	Confirmed and probable cases
Syphilis, secondary	Routinely notifiable	Confirmed and probable cases
Syphilis, early non-primary non-secondary	Routinely notifiable	Confirmed and probable cases
Syphilis, unknown duration or late	Routinely notifiable	Confirmed and probable cases
Syphilis, congenital	Routinely notifiable	Confirmed and probable cases
Tetanus	Routinely notifiable	All cases prior to classification

Condition	Notification Timeliness	Cases Requiring Notification
Toxic-shock syndrome (non-Streptococcus)	Routinely notifiable	Confirmed and probable cases
Trichinellosis (Trichinosis)	Routinely notifiable	All cases prior to classification
Tuberculosis	Routinely notifiable	Confirmed cases
Tularemia - All cases other than suspected intentional release	Routinely notifiable	Confirmed and probable cases
Varicella	Routinely notifiable	Confirmed and probable cases
<i>Vibrio cholerae</i> infection (cholera)	Routinely notifiable	Confirmed cases
Vibriosis	Routinely notifiable	Confirmed and probable cases
Waterborne disease outbreaks	Routinely notifiable	All outbreaks
Yellow Fever	Routinely notifiable	Confirmed and probable cases
Zika virus disease - Zika virus disease, congenital - Zika virus disease, non-congenital	Routinely notifiable	Confirmed and probable cases

¹ Anthrax subclassifications: cutaneous anthrax, ingestion anthrax, inhalation anthrax, injection anthrax, and welder's anthrax

² Viral hemorrhagic fever diseases: Chapare virus, Crimean-Congo, Ebola, Guanarito, Junín (Argentine), Lassa virus, Lujo virus, Machupo (Bolivian), Marburg virus, Rift Valley fever virus, or Sabia- associated (Brazilian)

³ Arboviral diseases: California encephalitis virus disease; California serogroup virus disease, neuroinvasive and non-neuroinvasive (Calif. Serogroup); Chikungunya virus disease; Eastern equine encephalitis virus disease, neuroinvasive and non-neuroinvasive; Jamestown Canyon virus disease, neuroinvasive and non- neuroinvasive; Keystone virus disease; La Crosse virus disease, neuroinvasive and non-neuroinvasive; Powassan virus disease (Powassan), neuroinvasive and non- neuroinvasive; Snowshoe hare virus disease; St. Louis encephalitis virus disease, neuroinvasive and non- neuroinvasive; Trivittatus virus disease; Western equine encephalitis virus disease, neuroinvasive and non-neuroinvasive; West Nile virus disease, neuroinvasive and non-neuroinvasive

⁴ Notification for all confirmed cases of cancer should be made at least annually

⁵ For surveillance reporting purposes, jurisdictions are grouped into high- and low-incidence categories. Only Arizona and California are classified as high- incidence jurisdictions currently. Probable cases are only reported from low-incidence jurisdictions; however, confirmed cases are reported from both high- and low-incidence jurisdictions.

⁶ Dengue virus infections include: dengue and severe dengue

⁷ Outbreaks are defined by state and local health departments, all situations deemed by a local or state health department to be an outbreak are notifiable

⁸ For surveillance reporting purposes, jurisdictions are grouped into high- and low-incidence categories. Confirmed cases are only reported from low- incidence jurisdictions; however, probable and suspected cases are reported from both high- and low-incidence jurisdictions.