



(rev. 02/17/2016)

For information or weekday disease reporting call 860-509-7994. For reporting on evenings, weekends, and holidays call 860-509-8000.

Instructions for Submitting the PD-23

This is a three-part form for reporting diseases as required under Sections 19a-36-A3 and 19a-36-A4 (see back side of form) of the Public Health Code and Sections 19a-2a and 19a-215 of the Connecticut General Statutes. The list of reportable diseases, emergency illnesses, and health conditions is revised annually. Mail the white copy to the Connecticut Department of Public Health, Epidemiology and Emerging Infections Program at the address above. Mail the canary copy to the Director of Health of the patient's town of residence. Retain the pink copy in the patient's medical record. Mail reports in envelopes marked "Confidential."

Use Other Forms or Methods to Report

- Epidemiology and Emerging Infections Program 860-509-7994
Immunization Program 860-509-7929
Occupational Diseases 860-509-7740
Sexually Transmitted Diseases 860-509-7920
Tuberculosis 861-509-7722

Category 1 Diseases: Report immediately by telephone on the day of recognition or strong suspicion of disease for those diseases marked with a telephone icon. Call 860-509-7994. These diseases must also be reported by mail within 12 hours.
Category 2 Diseases: All other diseases not marked with a telephone icon are Category 2 diseases. These diseases must be reported by mail within 12 hours of recognition or strong suspicion of disease.

- Acquired Immunodeficiency Syndrome (1,2)
Anthrax
Botulism
Brucellosis
California group arbovirus infection
Campylobacteriosis
Carbon monoxide poisoning (3)
Chancroid
Chickenpox
Chickenpox-related death
Chikungunya
Chlamydia (C. trachomatis) (all sites)
Cholera
Cryptosporidiosis
Cyclosporiasis
Dengue
Diphtheria
Eastern equine encephalitis virus infection
Ehrlichia chaffeensis infection
Escherichia coli O157:H7 gastroenteritis
Gonorrhea
Group A Streptococcal disease, invasive (4)
Group B Streptococcal disease, invasive (4)
Haemophilus influenzae disease, invasive all serotypes (4)
Hansen's disease (Leprosy)
Healthcare-associated infections (5)
Hemolytic-uremic syndrome (6)
Hepatitis A
Hepatitis B
Hepatitis C
HIV-1 / HIV-2 infection in (1)
Hepatitis C
Hepatitis D
Hepatitis E
Hepatitis F
Hepatitis G
Hepatitis H
Hepatitis I
Hepatitis J
Hepatitis K
Hepatitis L
Hepatitis M
Hepatitis N
Hepatitis O
Hepatitis P
Hepatitis Q
Hepatitis R
Hepatitis S
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FOOTNOTES:
1. Report only to State.
2. CDC case definition.
3. Includes persons being treated in hyperbaric chambers for suspect CO poisoning.
4. Invasive disease: confirmed by isolation from sterile fluid (blood, CSF, pericardial, pleural, peritoneal, joint, or vitreous), bone, internal body sites, or other normally sterile site including muscle.
5. Report HAIs according to current CMS pay-for-reporting or pay-for-performance requirements. Detailed instructions on the types of HAIs, facility types and locations, and methods of reporting are available on the DPH website: www.ct.gov/dph/HAI.
6. On request from the DPH and if adequate serum is available, send serum from patients with HUS to the DPH Laboratory for antibody testing.
7. Reporting requirements are satisfied by submitting the Hospitalized and Fatal Cases of Influenza—Case Report Form to the DPH in a manner specified by the DPH.
8. Clinical sepsis and blood or CSF isolate obtained from an infant ≤72 hours of age.
9. Individual cases of "significant unusual illness" are also reportable.
10. Community-acquired: infection present on admission to hospital, and person has no previous hospitalizations or regular contact with the health-care setting.