

2013 State Reportable Conditions Assessment (SRCA) User Instructions

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I. Introduction and Background:

The State Reportable Conditions Assessment (SRCA) is an annual, web-based assessment of reportable conditions. This joint Council of State and Territorial Epidemiologists (CSTE) and Centers for Disease Control and Prevention (CDC) effort has been ongoing since 2007 and collects information on what conditions are reportable where, in states, territories, and other large jurisdictions. The SRCA is the only publicly available, national repository of information on what conditions are reportable where and by whom. Collecting detailed data on reporting requirements will help make the SRCA a more complete database of reportable condition information that can be used by public health, researchers, and healthcare providers.

The SRCA covers reporting requirements, as defined by regulation or legislation, for conditions defined as reportable by clinicians (i.e., health care providers), laboratories, hospitals, and other reporters in your jurisdiction. SRCA responses should reflect these reporting regulations or rules as closely and accurately as possible. Any conditions that must be reported to the state public health agency should be considered reportable in the SRCA. If a condition is reportable to another department within your state (e.g., Department of Agriculture) but the state health agency receives this information as the result of a data-sharing agreement, then the condition should also be considered reportable. In addition, the information entered into the SRCA should be accurate and reflective of your state's reporting rules **prior to July 1, 2013**.

In order to decrease the burden on state respondents, the 2013 SRCA has been pre-populated with state responses from 2011, when the last SRCA was conducted. Because the SRCA was not conducted for 2012, CSTE will interpolate reporting requirements for 2012 based on differences in responses to the 2011 and 2013 assessments. You will be asked to review these differences and report when changes were made prior to submitting your completed SRCA.

Data from the 2013 SRCA pertaining to nationally notifiable infectious diseases will be used in generating tables for the *Morbidity and Mortality Weekly Report (MMWR)*. In addition, all SRCA data will be displayed in a query-results webpage on the CSTE website after the assessment is completed and results have been validated:
<http://www.cste.org/dnn/ProgramsandActivities/PublicHealthInformatics/StateReportableConditionsQueryResults/tabid/261/Default.aspx>.

CSTE is charged with providing a comprehensive and accurate list of reportable conditions by state and territory, and with your participation, CSTE will achieve a 100% response rate.

II. Tips for completing the SRCA

Understand user roles and responsibilities:

There are two types of SRCA users with different permissions and levels of access.

1. State Administrator (State Epidemiologist, in most cases):
 - a. Add State Users and assign State Users to specific sections
 - b. Full access to all state data at all times
 - c. Access to Condition Change Summary to monitor progress and changes
 - d. Responsible for final review of all data, including 2012 data interpolation responses, and submitting completed data to CSTE
2. State User:
 - a. Enter or edit responses for sections to which he or she has been assigned
 - b. Access to Condition Change Summary to view changes
 - c. Responsible for submitting completed sections to State Administrator for review
 - d. Responsible for completing all 2012 Data Interpolation responses

Divide and conquer:

The SRCA is divided by section based on condition types. You may find it helpful to delegate or assign certain sections to colleagues specializing in these areas (See Appendix 1 for full list of conditions in each section):

1. Birth Defects and Congenital Anomalies
2. Blood Borne Diseases
3. Enteric Diseases
4. Healthcare Associated Events
5. Infectious Disease Not Otherwise Specified
6. Injuries
7. Neurologic and Toxin-Mediated Conditions
8. Respiratory Conditions (Infectious)
9. Selected Non-Infectious Diseases
10. Sexually Transmitted Diseases
11. Systemic Conditions
12. Toxic Effects of Non-Medicinal Substances
13. Vaccine-Preventable Conditions
14. Zoonotic and Vectorborne Diseases

Have references handy:

It may be helpful to have your jurisdiction's reportable conditions laws, regulations, lists, and other documents readily available.

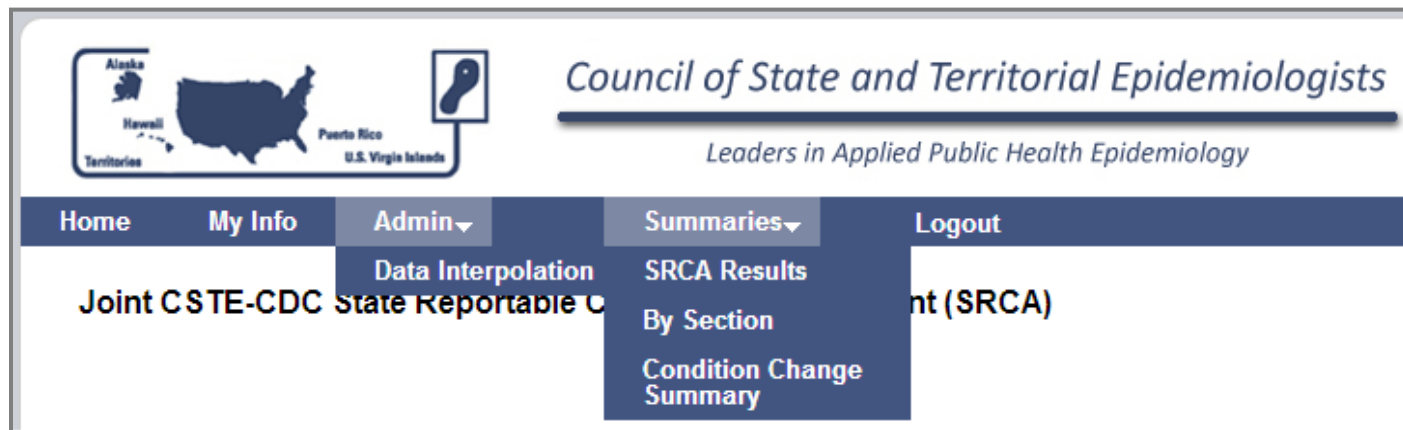
III. Getting Started

Logging in:

1. Access the SRCA: <http://srca.cste.org>
2. Enter your email address as your user name.
3. Enter the password you received via email. Click "Log on."
 - a. If typing the password does not work, try copying the password from the email and pasting it into the Password field.
4. Checking the "Remember me" box will keep you logged in if you navigate away from the SRCA.
5. If you forget your password, enter your email address and click "Forgot Password." The system will email you a new password.

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Toolbar: Once you log in, you will see a toolbar with the following functions:



1. Home:
 - a. View or print the SRCA instructions.
 - b. View Summary by Section to enter data.
 - i. Enter data ("Go" link).
 - ii. View Status, Assignments, % Done, and Last Modified for each section.
 - c. Review Full SRCA in view-only mode ("Review Full SRCA" button).
 - d. Access 2012 Data Interpolation page ("2012 Data Interpolation" button).
2. My Info:
 - a. Change your user information or password.
 - b. Note that changing your email address will change your username and require you to log in again.
3. Admin (for State Administrator):
 - a. Add, edit, or delete State Users.
 - b. Reset passwords for State Users.
 - c. Access 2012 Data Interpolation page to enter data.
4. Admin (for State Users):
 - a. Access 2012 Data Interpolation page to enter data.
5. Summaries:
 - a. SRCA Results: View a summary of current SRCA results for your jurisdiction, organized by timeframe.
 - b. By Section: this is the same as your Home Page (see #1).
 - c. Condition Change Summary: View a summary of all latest changes that have been made by condition, SRCA section, User, and time/date.
6. Logout

IV. Managing Users and Assigning Sections for Data Entry

Add State Users to help complete the SRCA for your jurisdiction (State Administrator only):

1. Click the "Admin" dropdown in the top header and select "Users."
2. Click "New User" button.

The image shows a form titled "User Administration". It has three input fields labeled "Last", "First", and "Email". Below these fields is a "New User" button. A blue dashed arrow points to the "New User" button.

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3. Enter the name, email, and telephone of the user. To save, click the disk icon () under Actions, or click  to cancel.



Last	First	Email	Telephone	Role	Locked	Actions
Smith	Joe	joesmith@email.com	555-758-8888	State User	☐	  R

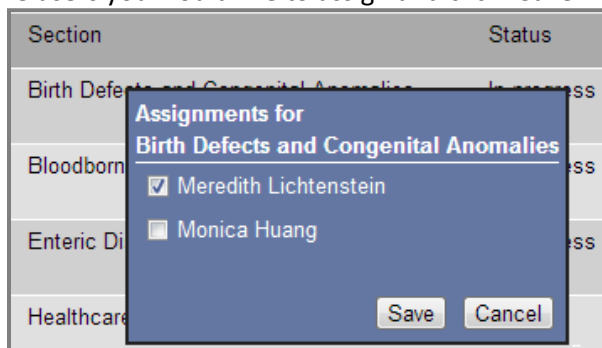
Page 1 of 0

New User

4. An email notification will be sent automatically to the new State User, providing their password and prompting them to log in to the SRCA.
5. Other functions on this page:
 - a. *Edit users:* select the user row and click on the pencil icon () to edit. Type new information, and click the disk icon () to save.
 - b. *Delete users:* select the user row and click on the trash icon () to delete.
 - c. *Reset passwords:* click the “R” icon for the State User’s row. This will generate an email to the user containing a new password.

Assign State Users to sections of the SRCA to allow them to enter or edit data for conditions in that section (State Administrator only):

1. Access the Summary by Section page by clicking “Home” OR “Summaries,” “By Section” in the toolbar.
2. Click on the link in the “Assigned To” column for the section you would like to assign. If no one is yet assigned to this section, the link will read “Unassigned.” In the pop-up, you will see a list of all SRCA users for your jurisdiction.
3. Select the users you would like to assign and click “Save.” Their names will now appear under “Assigned To.”



Section	Status
Birth Defects and Congenital Anomalies	In progress
Bloodborne	ss
Enteric Di	ss
Healthcare	

Assignments for Birth Defects and Congenital Anomalies

☒ Meredith Lichtenstein

☐ Monica Huang

Save Cancel

Assign yourself to a section of the SRCA to enter or edit data for conditions in that section (State Users only):

1. Access the Summary by Section page by clicking either “Home” OR “Summaries,” “By Section” in the toolbar.
2. Click “Assign to me” in the “Edit” column on the far right. Your name will now appear in the “Assigned To” column.

V. Entering Data for Reportable Conditions

Review pre-populated responses:

Since the 2013 SRCA was pre-populated with state responses from 2011, the majority of conditions will already have responses recorded. State Users should review their assigned sections for any changes. To track the review process, utilize the “Reviewed” checkboxes on the right side of the Section Edit page. These checkboxes are OPTIONAL and

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will show up for all users in your state. Conditions may be sorted by their reviewed status by clicking the box next to “Show only not reviewed items.”

Healthcare-Associated Events [Change](#)

☐ Show only NNCs
☐ Show only incomplete items
☐ Show only not reviewed items

☐ Condition	Healthcare Providers	Hospitals	Laboratory	☐ Reviewed
☐ Healthcare-associated Adverse Event	1 Week(s)	1 Day(s)	Not Reportable	☒
☐ Catheter-associated Urinary Tract Infection (UTI)	1 Week(s)	1 Day(s)	Not Reportable	☒
☐ Catheter-associated Urinary Tract Infection (UTI), CD4 count	1 Week(s)	1 Day(s)	Not Reportable	☐

Enter or Edit data for conditions by section:

- To enter, edit, or review data in the SRCA, click the “Go” link for the section you would like to edit in the “Edit” column on the right side of the Summary by Section page.
NOTE: State Users must be assigned to the section in order to enter data. If you are not assigned to the section, you will see the data in a view-only mode.
- On the Section Edit page, click a condition row to begin entering data. This opens the available response choices for each type of reporter.
NOTE: These options have been customized for your state according to data collected in the 2011 SRCA and verified by the State Epidemiologist. Please contact CSTE if any changes are needed.
- Enter the reporting requirement for each condition and type of reporter.
 - If the condition is named in your state rules or lists with a required reporting timeframe, select the appropriate timeframe from the choices.

Birth Defects and Congenital Anomalies [Change](#)

☐ Show only NNCs
☐ Show only incomplete items
☐ Show only not reviewed items

☐ Condition	Healthcare Providers	Hospitals	Laboratory	☐ Reviewed
☐ Abdominal Wall Defects Add Subset Clear Done Nationally Notifiable ☐ Core Condition ☒	☐ Not Reportable ☐ Immediately ☐ 1 Day(s) ☒ 1 Week(s) ☐ Implicit Rept.	☐ Not Reportable ☐ Immediately ☒ 1 Day(s) ☐ 1 Week(s) ☐ 180 Day(s) ☐ Implicit Rept.	☒ Not Reportable ☐ Immediately ☐ 1 Day(s) ☐ 1 Week(s) ☐ Implicit Rept.	☐

- If the condition is not named on your state lists but falls under general, “catch-all” reporting language, such as “all outbreaks,” “disease of public health importance,” etc., select “Implicit Rept.”
 - A dialog box will appear with a list of general reportable conditions and events. Select one or more appropriate options and click “Done.”
 Note that “Implicit Rept.” will show as the selected answer choice, not the specific language selected below. These categories are customized for each state based on the 2011 SRCA. Two examples of the dialog box are below.

Implicit Reporting Categories X

☐ Occurrence of any unusual disease of public health importance
☐ Outbreaks or clusters of public concern
☐ Occupational illness

Implicit Reporting Categories X

☐ Exposure, biological
☐ Exposure, chemical
☐ Event, bioterrorist
☐ Event, terrorist
☐ Outbreaks or clusters of public concern
☐ Occurrence of any unusual disease of public health importance

- If the condition is not reportable according to your jurisdiction’s rules, select “Not Reportable.”

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- Click “Done” to collapse the row. Your responses for each row will save automatically.
- Your data will now appear as entered:

Birth Defects and Congenital Anomalies Change					☐ Show only NNCs
					☐ Show only incomplete items
					☐ Show only not reviewed items
☐ Condition	Healthcare Providers	Hospitals	Laboratory	☐ Reviewed	
☐ Abdominal Wall Defects	1 Week(s)	1 Day(s)	Not Reportable	☐	

Summary of data entry options

If the condition is...	Then select...
Named in rules or lists with a required reporting timeframe	Timeframe
Not named specifically but falls under general, “catch-all,” reporting language	“Implicit Rept.” and appropriate language from the dialog box
Not reportable in your jurisdiction	“Not Reportable”

Enter data for multiple conditions at once if they have the *same exact reporting requirements*:

- Select the conditions you wish to edit using the checkboxes to the left of the condition names, or click the box next to “Condition” to select all conditions on the screen.

Healthcare-Associated Events Change					☐ Show only NNCs
					☐ Show only incomplete items
					☐ Show only not reviewed items
☒ Condition	Healthcare Providers	Hospitals	Laboratory	☐ Reviewed	
☒ Healthcare-associated Adverse Event	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Catheter-associated Urinary Tract Infection (UTI)	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Catheter-associated Urinary Tract Infection (UTI), CD4 count	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Central-line associated Bloodstream Infection	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Healthcare-associated Infection	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Hospital-acquired Infection	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Ventilator-associated Pneumonia	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Nosocomial Infection	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Surgical Site Infection	Click To Edit	Click To Edit	Click To Edit	☐	
☒ Vancomycin-Resistant Enterococci (VRE) Infection	Click To Edit	Click To Edit	Click To Edit	☐	
Mark Selected As (select) ▼ (select) ▼ (select) ▼ Apply					

- Use the drop-down menus at the bottom of the screen next to “Mark Selected As,” to choose the appropriate responses for each reporter.
 - Choose “Reset Values” to clear responses for the selected rows.

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- Click "Apply," and the responses will be updated and saved for all selected conditions. Note that there may be a time delay as the system saves these responses.

Healthcare-Associated Events [Change](#)

☐ Show only NNCs
☐ Show only incomplete items
☐ Show only not reviewed items

☒ Condition	Healthcare Providers	Hospitals	Laboratory	☐ Reviewed
☒ Healthcare-associated Adverse Event	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Catheter-associated Urinary Tract Infection (UTI)	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Catheter-associated Urinary Tract Infection (UTI), CD4 count	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Central-line associated Bloodstream Infection	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Healthcare-associated Infection	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Hospital-acquired Infection	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Ventilator-associated Pneumonia	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Nosocomial Infection	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Surgical Site Infection	1 Week(s)	1 Day(s)	Not Reportable	☐
☒ Vancomycin-Resistant Enterococci (VRE) Infection	1 Week(s)	1 Day(s)	Not Reportable	☐

Mark Selected As

1 Week(s) ▾

1 Day(s) ▾

Not Reportable ▾

Apply

- Remember to de-select conditions by un-checking individual boxes or de-select ALL conditions by re-clicking the box next to "Condition."

Specify subsets of reportable conditions (OPTIONAL):

If only a specific subset of a condition is reportable in your jurisdiction, you may specify this using the **Add Subset** function. Creating a subset will create a new row for data entry. Use this to specify reporting details (See Appendix 2 for a full list of available modifiers for subset conditions):

- Age groups or age ranges
- Etiologic agents
- Special circumstances (intentional release, mortality, morbidity, novel cases, etc.)
- Treatment (administered, prescribed, etc.)
- Occupational (all work-related cases, in a childcare worker, in a food handler, etc.)
- Setting (school setting, correctional facility, homeless facility, etc.)
- Disease status (active, chronic, latent, etc.)
- Infected species
- Antibiotic sensitivity
- Lab findings or outcomes
- Source/site (sterile site, invasive, neuroinvasive, etc.)
- Other reporting requirements
- Case classification
- Reporting method (individual case vs. aggregate count)

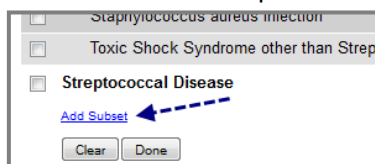
- On the Section Edit page, click the row for the condition you would like to add a subset for.
- Click the "Add Subset" link below the name.
- Select details to specify the subset, using the tabs along the left side of the dialog box. Note that your selections will change the name of the condition row, which is previewed at the top of the box.

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- Click "OK" to save your subset. This creates a new condition row for data entry, which appears below the original condition.
- To remove subsets created by users in your state only, click the subset condition row and click the "Delete Subset" link that appears below the condition name. Note that a user-created subset may only be deleted if it does not have its own subset(s).

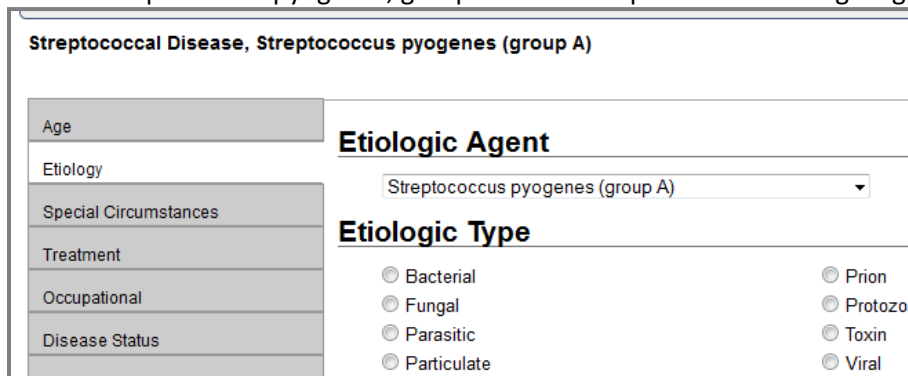
Example: "Streptococcal pyogenes, group A, sterile sites" is reportable in my jurisdiction. To create this subset:

- Click the row for Streptococcal disease. Click "Add Subset"



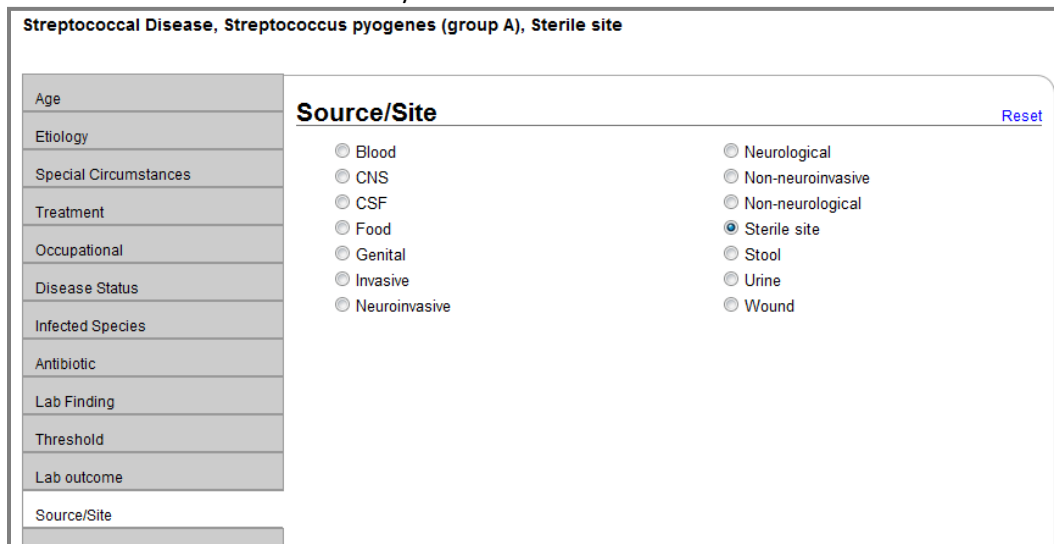
A screenshot of a web interface showing a list of conditions. The 'Streptococcal Disease' condition is selected, and the 'Add Subset' link is highlighted with a blue dashed arrow. Below the list are 'Clear' and 'Done' buttons.

- Select "Streptococcus pyogenes, group A" in the drop down for Etiologic Agent.



A screenshot of a form titled 'Streptococcal Disease, Streptococcus pyogenes (group A)'. The 'Etiologic Agent' dropdown is set to 'Streptococcus pyogenes (group A)'. The 'Etiologic Type' section has radio buttons for Bacterial, Fungal, Parasitic, Particulate, Prion, Protozo, Toxin, and Viral. The 'Bacterial' option is selected.

- Select "Sterile Site" under Source/Site.



A screenshot of a form titled 'Streptococcal Disease, Streptococcus pyogenes (group A), Sterile site'. The 'Source/Site' section has radio buttons for Blood, CNS, CSF, Food, Genital, Invasive, Neuroinvasive, Neurological, Non-neuroinvasive, Non-neurological, Sterile site, Stool, Urine, and Wound. The 'Sterile site' option is selected. A 'Reset' link is visible in the top right corner.

- Click "OK."
- "Streptococcal disease, Streptococcus pyogenes (group A), Sterile Site" is now a condition for data entry.

Nationally Notifiable Conditions:

- Conditions with an asterisk (*) before the name are Nationally Notifiable (NNC) to CDC.
- View only the NNCs on the page by clicking the box next to "Show only NNCs."

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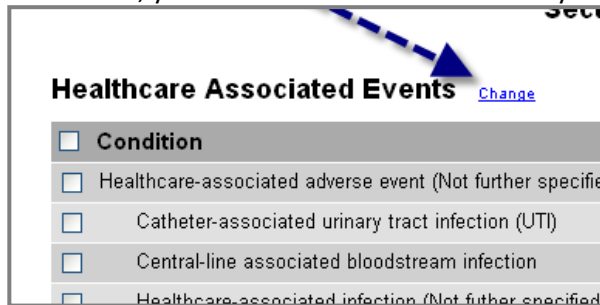
Search for conditions and edit data for search results:

1. To search conditions by name, type a search term in the box at the top of the Section Edit page. Push Enter or click "Go."
2. All conditions in any SRCA section matching the search term will be displayed.
3. Enter data for conditions in the search results in the same way as entering data by section.
4. Click "Reset" next to the search bar to return to the previous Section Edit screen.

To continue data entry in a different section:

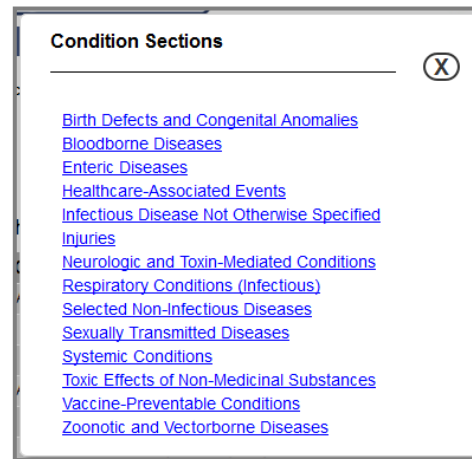
1. To navigate to a different section for data entry, return to the Summary by Section screen by choosing "Home" OR "Summaries," "By Section" in the toolbar, OR
2. Click the "Change" link next to the Section Name and choose a different section.

NOTE: State Users must be assigned to the section in order to enter data. If you are not assigned to the section, you will see the data in a view-only mode.



Healthcare Associated Events [Change](#)

☐ Condition
☐ Healthcare-associated adverse event (Not further specified)
☐ Catheter-associated urinary tract infection (UTI)
☐ Central-line associated bloodstream infection
☐ Healthcare-associated infection (Not further specified)



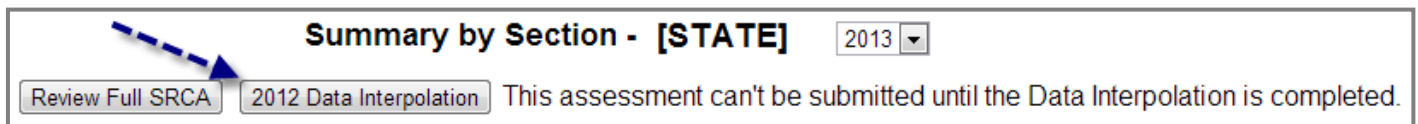
Condition Sections (X)

- [Birth Defects and Congenital Anomalies](#)
- [Bloodborne Diseases](#)
- [Enteric Diseases](#)
- [Healthcare-Associated Events](#)
- [Infectious Disease Not Otherwise Specified](#)
- [Injuries](#)
- [Neurologic and Toxin-Mediated Conditions](#)
- [Respiratory Conditions \(Infectious\)](#)
- [Selected Non-Infectious Diseases](#)
- [Sexually Transmitted Diseases](#)
- [Systemic Conditions](#)
- [Toxic Effects of Non-Medicinal Substances](#)
- [Vaccine-Preventable Conditions](#)
- [Zoonotic and Vectorborne Diseases](#)

VI. 2012 Data Interpolation

The purpose of this page is to collect data on reporting requirements for 2012 since no SRCA was conducted for that year. Based on your state's responses for both 2011 and 2013, the system determines if changes have been made and allows users to mark when those changes were made, either before or after July 1, 2012. This is because SRCA responses should be based on condition reporting requirements in effect for the majority of the given calendar year. New conditions made reportable BEFORE July 1, 2012 would be considered reportable for 2012. Conditions made reportable AFTER July 1, 2012, would be considered not reportable for 2012.

1. Access the 2012 Data Interpolation page via the "2012 Data Interpolation" button on the Home page or via "Admin," "2012 Data Interpolation" on the toolbar.



Summary by Section - [STATE] 2013

[Review Full SRCA](#) [2012 Data Interpolation](#) This assessment can't be submitted until the Data Interpolation is completed.

2. Be sure Year #1 is set to 2013 and click the "Find Differences" button.



Year #1: 2013

Target Year: 2012

Year #2: 2011

[Find Differences](#)

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- Conditions that have been changed are automatically listed alphabetically, but can be sorted by SRCA section.
- For each condition, mark when the reporting requirements changed, either BEFORE or AFTER July 1, 2012. If you mark BEFORE July 1, 2012 for a condition, the system will use your 2013 response for 2012; if you mark AFTER July 1, 2012, the system will use your 2011 response for 2012. Again, this is because SRCA responses are based on condition reporting requirements in effect for the **majority** of the given calendar year.

Differences Between 2011 and 2013 for [STATE]

Indicate whether each change took place BEFORE or AFTER July 1, 2012.

Condition	Section	Changed
Anaplasmosis	Zoonotic and Vectorborne Diseases	☒ Before ☐ After
Anaplasmosis, Anaplasma phagocytophilum	Zoonotic and Vectorborne Diseases	☐ Before ☒ After
Anaplasmosis, Undetermined etiologic type	Zoonotic and Vectorborne Diseases	☐ Before ☐ After

- This page must be 100% complete before a State Administrator can submit the full SRCA to CSTE.

VII. Review and Submit Completed Data

Condition Change Summary (all users):

The Condition Change Summary summarizes changes as they are made to your state's SRCA responses. When a user makes a change (e.g., changes a reporting timeframe, adds a new subset to a condition, etc.), the system records the condition, the SRCA section in which the condition is found, the user who made the change, and the date and time at which the change was made. Only the most recent change to a condition will appear in the summary.

- Access the Condition Change Summary via the "Summaries," "Condition Change Summary" on the toolbar.
- Be sure the first year dropdown is set to 2013 and the second is set to 2011.
- Conditions that have been changed are automatically listed alphabetically, but can be sorted by the SRCA Section, User, or date/time.

Condition Change Summary - [STATE]			
Compare 2013 to 2011			
Condition	Section	User	Last Modified
Abdominal Wall Defects	Birth Defects and Congenital Anomalies	Meredith State	12/10/2013 04:41:18 pm

Submit Completed Sections to your State Administrator (State Users):

When a section is complete, submit it to your State Administrator for their review. State Users will no longer be able to edit this section once submitted.

- Access the Summary by Section page via the "Home" OR "Summaries," "By Section" on the toolbar.
- For each section that is 100% Done, a link to "Submit to State Administrator" will appear in the "Edit" column. This link will not appear if any conditions in that section are not complete.

Section	Status	Assigned To	% Done	Last Modified	Edit
Birth Defects and Congenital Anomalies	In progress	Joe Smith	100%	10/11/2011 by Joe Smith	Go Submit to State Admin
Bloodborne Diseases	---	Unassigned	0%		Go Assign to me
Enteric Diseases	---	Unassigned	0%		Go

- Click the link to submit to your State Administrator. They will receive an email notification prompting them to review the section.
- The section is now locked to editing by State Users. Only the State Administrator will be able to edit the section. Clicking "Go" as a State User will lead to a view-only mode. Note that if a State User needs to edit

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the section after submitting to State Administrator, CSTE National Office can undo the submission of that section.

Review and Submit Completed SRCA to CSTE (State Administrator):

State Administrators are responsible for final review and submission of the SRCA to CSTE.

1. Access the Summary by Section page via the "Home" OR "Summaries," "By Section" on the toolbar.
2. Click "Go" to review or edit any section, including sections submitted for your review.
3. When all sections AND the 2012 Data Interpolation are 100% Done, the button to "Submit to CSTE" on the Summary by Section page will become available.

Review Full SRCA	2012 Data Interpolation	Submit to CSTE				
Section	Status	Assigned To	% Done	Last Modified	Edit	
Birth Defects and Congenital Anomalies	In progress	Joe Smith	100%	12/10/2013 by Joe Smith	Go Submit to State Admin	
Bloodborne Diseases	---	Unassigned	0%		Go	
Enteric Diseases	---	Unassigned	0%		Go	

4. Click the button and confirm to submit all SRCA results to CSTE. CSTE will receive an email notification that your results have been submitted. Your jurisdiction's SRCA is now complete.
5. The SRCA form for your jurisdiction is now locked to editing by all users. "Go" will lead to a view-only mode.

VIII. APPENDIX 1: Alphabetical List of Conditions by Condition Category Grouping (*Nationally Notifiable Conditions [NNC])

<u>Birth Defects and Congenital Anomalies</u>		
Abdominal Wall Defects	Epispadia	Omphalocele
Alcohol-related Birth Defects	Fetal Alcohol Spectrum Disorders (FASD)	Other Specified Developmental Deformity
Anencephaly	Fetal Alcohol Syndrome (FAS)	Other Specified Genetic Disorder
Autism	Galactosemia	Other Specified metabolic Disorder
Autism Spectrum Disorders	Gastroschisis	Phenylketonuria
Biotinidase Deficiency	Hypospadia	Primary Congenital Hypothyroidism
Cardiac Defect	Inborn Errors of Metabolism	Spina Bifida
Cleft Lip	Infant Hearing Loss	Sudden Infant Death Syndrome (SIDS)
Cleft Lip/Palate	Limb Reduction	
Cleft Palate	Maple Syrup Urine Disease	
Congenital Hyperthyroidism	Neural Tube Defect	
Down's Syndrome (Trisomy 21)		
<u>Bloodborne Diseases</u>		
Acquired Immunodeficiency Syndrome (AIDS)/HIV Stage III	*Hepatitis B, Perinatal	Hepatitis Viral Infection
Hepatitis B	Hepatitis C	Hepatitis Viral Infection, Non-A Non-B
*Hepatitis B, Acute	*Hepatitis C, Acute	*HIV Infection
*Hepatitis B, Chronic	*Hepatitis C, Past or Present	
	Hepatitis D	
<u>Enteric Diseases</u>		
Amebiasis	Campylobacteriosis	*Cholera

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Clostridium difficile Infection
 Clostridium perfringens Infection
 Clostridium perfringens Toxin
 Poisoning
 Cryptococcosis
 *Cryptosporidiosis
 *Cyclosporiasis
 Enterobacteriaceae Infection
 Enterobacteriaceae Infection,
 Carbapenem, Resistant
 Enterovirus Infections
 Escherichia coli Infection

*Escherichia coli Infection,
 Escherichia coli (shiga-toxin
 producing)
 Foodborne Disease
 *Foodborne Disease, Outbreak
 *Giardiasis
 *Hepatitis A
 Hepatitis E
 *Listeriosis
 Norovirus Infections
 Rotavirus Infections
 Salmonella spp. Infections
 *Salmonellosis

*Shigellosis
 Staphylococcal Disease
 Staphylococcal Enterotoxin B
 Intoxication
 *Trichinellosis
 *Typhoid Fever
 Vibriosis
 *Vibriosis, Vibrio cholerae non-
 O1/-O139
 Waterborne Disease
 *Waterborne Disease, outbreak
 Yersiniosis

Healthcare-Associated Events

Catheter-associated Urinary Tract
 Infection (UTI)
 Central-line associated
 Bloodstream Infection

Healthcare-associated Adverse
 Event
 Healthcare-associated Infection
 Hospital-acquired Infection
 Nosocomial Infection

Surgical Site Infection
 Vancomycin-resistant Enterococci
 (VRE) Infection
 Ventilator-associated Pneumonia

Infectious Disease Not Otherwise Specified

Acanthamoeba Disease (excluding
 keratitis)
 Acanthamoeba Keratitis

Balamuthia mandrillaris Disease
 Conjunctivitis

Primary Amebic
 Meningoencephalitis
 Trachoma

Injuries

Animal Bites
 Burns
 Contaminated Sharps Injury
 Disaster Casualty
 Drownings and Submersions
 Drug (Controlled Substance)
 Overdose
 Farm-related

Gunshot Wounds
 Hazardous Substances Emergency
 Event
 Head Injury
 Hyperthermia
 Hypothermia
 Intimate Partner Violence
 Motor Vehicle Injury

Noise-induced Hearing Loss
 Smoke Inhalation
 Spinal Cord Injury
 Suicide
 Traumatic Fatalities
 Traumatic Injuries
 Violent Injuries

Neurologic and Toxin-Mediated Conditions

Acute Flaccid Paralysis
 Botulism
 *Botulism, food
 *Botulism, infant
 *Botulism, wound
 *Botulism, other
 Ciguatera

Creutzfeldt-Jakob Disease
 Domoic Acid Poisoning
 Encephalitis
 Fish and Shellfish Poisoning
 Guillain-Barre Syndrome
 Meningitis
 Mushroom Poisoning

Neurotoxic Shellfish Poisoning
 Paralytic Shellfish Poisoning
 Ricin Poisoning
 Scombroid
 Variant Creutzfeldt-Jakob Disease

Respiratory Conditions (Infectious)

Acute Upper Respiratory Illness
 *Coccidioidomycosis
 Histoplasmosis

Influenza-like Illness
 *Legionellosis
 Pneumonia

*Psittacosis
 Respiratory Syncytial Virus (RSV)
 Infection

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*Severe Acute Respiratory
Syndrome-associated
Coronavirus Disease

Staphylococcal Enterotoxin B
Pulmonary Poisoning
*Tuberculosis

Selected Non-Infectious Diseases

Asbestosis
Asthma
Berylliosis
Byssinosis
*Cancer
Cerebral Palsy

Chronic Fatigue Syndrome
Coal Workers' Pneumoconiosis
Diabetes
Hypersensitivity Pneumonitis
Mesothelioma
Parkinson's Disease

Pneumoconiosis
Pneumonitis
Scabies
*Silicosis

Sexually Transmitted Diseases

*Chancroid
**Chlamydia trachomatis* Infection
Chlamydial Infection
Genital Warts
*Gonorrhea
Granuloma Inguinale
Herpes Genitalis
Herpes Simplex

Lymphogranuloma Venereum
Mucopurulent Cervicitis (MPC)
*Neurosyphilis
Nongonococcal Urethritis (NGU)
Ophthalmia Neonatorum
Pelvic Inflammatory Disease (PID)
Syphilis
*Syphilis, Primary

*Syphilis, Secondary
*Syphilis, Latent
*Syphilis, Early Latent
*Syphilis, Unknown Duration
*Syphilis, [Late] Non-Neurological
*Syphilis, Congenital
*Syphilitic Stillbirth

Systemic Conditions

*Hansen's Disease
Hemolytic Uremic Syndrome
*Hemolytic Uremic Syndrome,
Post-diarrheal
Hepatitis G
Kawasaki Disease
Rash Outbreak
Reye's Syndrome
Rheumatic Fever

Septicemia
Staphylococcus aureus Infection
**Staphylococcus aureus* Infection,
Vancomycin-intermediate
**Staphylococcus aureus* Infection,
Vancomycin-resistant
Streptococcal Disease
*Streptococcal Toxic Shock
Syndrome (STSS)

Streptococcus pneumoniae
Infection
**Streptococcus pneumoniae*
Infection, invasive
Toxic Shock Syndrome
*Toxic Shock Syndrome other than
Streptococcal

Toxic Effects of Non-medicinal Substances

Arsenic Poisoning
Cadmium Poisoning
Chemical Pneumonitis
Farmers' Lung
Lead Level
*Lead Level, Blood, <16 years, ≥10
µg/dL

*Lead Level, Blood, ≥16 years, ≥10
µg/dL
Lead Poisoning
Mercury Poisoning
Toxic Effects of Agricultural
Chemicals
Toxic Effects of Carbon Monoxide

Toxic Effects of Chemicals
Toxic Effects of Heavy Metals
Toxic Effects of Pesticides
* Toxic Effects of Pesticides, acute

Vaccine-Preventable Conditions

*Congenital Rubella Syndrome
*Diphtheria
Haemophilus influenzae Infection
**Haemophilus influenzae*
Infection, invasive

Immunization-related Adverse
reaction
Influenza
*Influenza, Pediatric, Mortality
*Influenza, influenza A virus, novel
cases

*Measles
Meningococcal Disease
*Mumps
*Non-Paralytic Poliovirus Infection
*Paralytic Poliomyelitis
*Pertussis

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*Rubella
 *Smallpox
 Smallpox Vaccination Adverse
 Event

*Tetanus
 Vaccinia Adverse Event
 Vaccinia Disease
 *Varicella

*Varicella, mortality

Anaplasmosis
 *Anaplasmosis, *Anaplasma*
phagocytophilum
 *Anaplasmosis, undetermined
 Angiostrongyliasis
 *Anthrax
 Arboviral Disease
 Arenavirus Infection
 *Babesiosis
 Bartonellosis
 Blastomycosis
 *Brucellosis
 California Serogroup Virus Disease
 *California Serogroup Virus
 Disease, Neuroinvasive
 *California Serogroup Virus
 Disease, Non-Neuroinvasive
 Chagas Disease
 Chikungunya
 Cysticercosis
 Colorado Tick Fever
 *Crimean-Congo Hemorrhagic
 Fever Virus Infection
 *Dengue Fever
 *Dengue Hemorrhagic Fever
 *Dengue Shock Syndrome
 Eastern Equine Encephalitis Virus
 Disease
 *Eastern Equine Encephalitis Virus
 Disease, Neuroinvasive
 *Eastern Equine Encephalitis Virus
 Disease, Non-Neuroinvasive
 *Ebola Virus Infection

Zoonotic and Vectorborne Diseases

Ehrlichiosis
 *Ehrlichiosis, *Ehrlichia chaffeensis*
 *Ehrlichiosis, *Ehrlichia ewingii*
 *Ehrlichiosis, undetermined
 Filariasis
 Glanders
 *Hantavirus Pulmonary Syndrome
 Japanese Encephalitis Virus
 Disease
 LaCrosse Virus Infection
 *Lassa Virus Infection
 Leishmaniasis
 Leptospirosis
 Louse-Borne Relapsing Fever
 *Lujo Virus Infection
 *Lyme Disease
 *Malaria
 *Marburg Virus Infection
 Melioidosis
 Monkeypox
 *New World Arenavirus Infection
 Nipah Virus Infection
 Orthopox
 *Plague
 Powassan Virus Disease
 *Powassan Virus Disease,
 Neuroinvasive
 *Powassan Virus Disease, Non-
 Neuroinvasive
 Q Fever
 *Q Fever, acute
 *Q Fever, chronic
 Rabies

*Rabies, animal
 *Rabies, human
 Rickettsial Disease
 Rift Valley Fever
 Rocky Mountain Spotted Fever
 *Spotted Fever Rickettsiosis
 St. Louis Virus Disease
 *St. Louis Virus Disease,
 Neuroinvasive
 *St. Louis Virus Disease, Non-
 Neuroinvasive
 Taeniasis
 Tick-borne Relapsing Fever
 Toxoplasmosis
 *Tularemia
 Typhus Fever
 Venezuelan Equine Encephalitis
 Virus Disease
 Vesicular Stomatitis
 Viral Hemorrhagic Fever
 West Nile Virus Disease
 *West Nile Virus Disease,
 Neuroinvasive
 *West Nile Virus Disease, Non-
 Neuroinvasive
 Western Equine Encephalitis Virus
 Disease
 *Western Equine Encephalitis
 Virus Disease, Neuroinvasive
 *Western Equine Encephalitis
 Virus Disease, Non-Neuroinvasive
 *Yellow Fever

IX. APPENDIX 2: Available Modifiers for Creating Subset Conditions (Optional)

<u>Age (Choose AGE GROUP or AGE RANGE)</u>		
AGE GROUP:	Toddler	Adult
Congenital	Child	Elderly/Geriatric
Perinatal	Pre-adolescent	
Newborn/Neonatal	Adolescent	AGE RANGE: Enter minimum
Infant	Pediatric	and/or maximum age
 <u>Etiologic Agent</u>		
14-3-3 Protein	California Serogroup Virus	Cyclospora spp.
Acanthamoeba spp.	Campylobacter coli	Dengue Virus
Acid-Fast Bacillus	Campylobacter enteritis	Eastern Equine Encephalitis Virus
Adenovirus	Campylobacter fetus	Ebola Virus
Ajellomyces capsulatum	Campylobacter jejuni	Echovirus
Ajellomyces dermatitidis	Campylobacter spp.	Ehrlichia chaffeensis
Alphavirus	Carbon Monoxide	Ehrlichia ewingii
Anaplasma phagocytophilum	Chemical	Ehrlichia spp.
Anaplasma spp.	Chikungunya Virus	Entamoeba histolytica
Arenavirus	Chlamydia psittaci	Enterobacter sakazakii
Arsenic	Chlamydia trachomatis	Enterobacteriaceae
Asbestos	Chlamydiaceae	Enterococcus spp.
Babesia divergens	Clostridium botulinum	Enterovirus
Babesia duncani	Clostridium botulinum Toxin	Escherichia coli
Babesia microti	Clostridium difficile	Escherichia coli
Babesia spp.	Clostridium perfringens	(Enteroaggregative)
Bacillus anthracis	Clostridium perfringens Toxin	Escherichia coli
Balamuthia mandrillaris	Clostridium tetani	(Enterohemorrhagic)
Bartonella spp.	Coal	Escherichia coli (Enteroinvasive)
Beryllium	Coccidioides immitis	Escherichia coli
Bordetella holmesii	Coccidioides posadasii	(Enteropathogenic)
Bordetella parapertussis	Coccidioides spp.	Escherichia coli (Enterotoxigenic)
Bordetella pertussis	Colorado Tick Fever Virus	Escherichia coli (Shiga-Toxin
Borrelia afzelii	Corynebacterium diphtheriae	Producing)
Borrelia burgdorferi	Cotton Dust	Escherichia coli (Sorbitol-Negative)
Borrelia duttoni	Coxiella burnetii	Escherichia coli O157:H7
Borrelia garinii	Crimean-Congo Hemorrhagic	Filovirus
Borrelia hermsii	Fever Virus	Flavivirus
Borrelia parkeri	Cryptococcus gattii	Francisella tularensis
Borrelia recurrentis	Cryptococcus neoformans Species	Giardia intestinalis
Borrelia spp.	Complex	Giardia spp.
Brucella abortus	Cryptococcus neoformans var.	Haemophilus ducreyi
Brucella canis	grubii	Haemophilus influenzae
Brucella melitensis	Cryptococcus neoformans var.	Haemophilus influenzae Non-Type
Brucella spp.	neoformans	b
Brucella suis	Cryptococcus non. V.neoformans	Haemophilus influenzae Type b
Bunyaviridae	Cryptococcus spp.	Hantavirus
Burkholderia mallei	Cryptosporidium parvum	Heavy Metal
Burkholderia pseudomallei	Cryptosporidium spp.	Hepatitis A Virus
Cadmium	Cyclospora cayetanensis	Hepatitis B Virus

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Hepatitis C Virus	Mycobacterium tuberculosis	Staphylococcus aureus Toxin
Hepatitis D Virus	Complex	Staphylococcus spp.
Hepatitis E Virus	Naegleria fowleri	Streptococcus agalactiae (Group B)
Hepatitis G Virus	Neisseria gonorrhoeae	Streptococcus haemolyticus
Human Herpes Virus 1	Neisseria meningitidis	Streptococcus pneumoniae
Human Herpes Virus 2	Nipah Virus	Streptococcus pyogenes (Group A)
Human Immunodeficiency Virus 1	Norovirus	Streptococcus spp.
Human Immunodeficiency Virus 2	Orthopoxvirus	T-2 Mycotoxin
Human Papillomavirus	Pesticide	Taenia solium
Human T-Cell Leukemia Virus 2	Plasmodium falciparum	Taenia spp.
Human T-Lymphotropic Virus Type 1	Plasmodium malariae	Toxoplasma gondii
Influenza A Virus	Plasmodium ovale	Toxoplasma spp.
Influenza Virus	Plasmodium spp.	Treponema pallidum
Jamestown Canyon Virus	Plasmodium vivax	Trichinella spiralis
Japanese Encephalitis Virus Group	Pneumocystis jiroveci	Trichinella spp.
Keystone Virus	Poliovirus	Trivittatus
Klebsiella granulomatis	Powassan Virus	Trypanosoma cruzi
Klebsiella pneumoniae	Rabies Virus	Undetermined
LaCrosse Virus	Respiratory syncytial Virus	Unspecified
Lassa Virus	Ricin Toxin	Vaccinia Virus
Lead	Rickettsia akari (rikettsialpox)	Varicella Zoster Virus
Legionella pneumophila	Rickettsia felis	Variola Virus
Legionella spp.	Rickettsia prowazekii	Venezuelan Equine Encephalitis Virus
Leptospira interrogans	Rickettsia rickettsii	Vesicular Stomatitis Virus
Leptospira spp.	Rickettsia spp.	Vibrio alginolyticus
Leishmania spp.	Rickettsia typhi	Vibrio cholerae
Listeria Monocytogenes	Rift Valley Fever Virus	Vibrio cholerae Non-O1
Listeria spp.	Rotavirus	Vibrio cholerae Non-O1/-O139
Marburg Virus	Rubella Virus	Vibrio cholerae O1
Mercury	Rubeola Virus	Vibrio cholerae O139
Monkeypox Virus	Salmonella spp.	Vibrio damsela
Mumps Virus	Salmonella spp. (Non-typhi)	Vibrio fluvialis
Mycobacterium africanum	Salmonella typhi	Vibrio furnissii
Mycobacterium avium Complex	Sarcoptes scabiei	Vibrio hollisae
Mycobacterium bovis	Saxitoxin	Vibrio imicus
Mycobacterium bovis BCG	Severe Acute Respiratory	Vibrio parahaemolyticus
Mycobacterium canettii	Syndrom-related Coronavirus	Vibrio spp.
Mycobacterium caprae	Shigella boydii	Vibrio spp. (Non-cholera)
Mycobacterium leprae	Shigella dysenteriae	Vibrio vulnificus
Mycobacterium microti	Shigella flexneri	West Nile Virus
Mycobacterium mageritense	Shigella sonnei	Western Equine Encephalitis Virus
Mycobacterium pinnipedii	Shigella spp.	Yellow Fever Virus
Mycobacterium spp.	Silica	Yersinia Enterocolitica
Mycobacterium spp. (Non-leprae and Non-TB)	Snowshoe Hare Virus	Yersinia pestis
Mycobacterium spp. (Non-leprae)	St. Louis Virus	Yersinia pseudotuberculosis
Mycobacterium spp. (Non-TB)	Staphylococcal Enterotoxin B	Yersinia spp.
Mycobacterium tuberculosis	Staphylococcus aureus	Yersinia spp. (Non-pestis)
	Staphylococcus aureus (Coagulase-Positive)	

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Etiologic Type

Bacterial	Particulate	Toxin
Fungal	Prion	Viral
Parasitic	Protozoal	

Special Circumstances

Bioterrorist event	Institutional setting	Outbreak
Cluster	Intentional release	Perinatal exposure
Community-acquired	Intentional transmission	Post-diarrheal
Community-associated	Morbidity	Post-infectious
Hospitalization	Mortality	Post-streptococcal
Imported case	Naturally-occurring	Pregnant woman
Initial diagnosis	Novel cases	

Treatment

Change in treatment outcome	Responding to treatment	Treatment prescribed
Post-exposure prophylaxis	Treatment administered	

Occupational

All work related cases	In a food handler	Other occupation
In a child care worker	In a healthcare worker	

Disease Status

Active	Critical	Primary
Acute	Early latent	Secondary
Carriers	Late latent	Tertiary
Cases	Latent	
Chronic	Latent (unknown duration)	

Infected Species

Alternative livestock	Dogs	Sheep
Animal	Goats	Swine
Aquaculture	Horses	Wildlife – avian
Cats	Human	Wildlife – mammal
Cattle	Poultry	Wildlife – reptile/amphibian

Antibiotic (Choose one value each from ANTIBIOTIC and ANTIBIOTIC SENSITIVITY)

ANTIBIOTIC:	Methicillin	ANTIBIOTIC SENSITIVITY:
Carbapenem	Oxacillin	Intermediate
Drug	Penicillin	Resistant
Glycopeptide	Vancomycin	

Lab Finding (*Will not appear as part of condition name)

CD4 count	Hemoglobin A1c*	Viral load*
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Threshold (Enter minimum and/or maximum value with unit)

Cell Count %	IU/L	µg/g
Cells/µL	µg/dl	

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Lab Outcome

Indeterminate lab test	Positive lab test
Negative lab test	Positive culture
Ordered lab test	Quantitative lab test result

Source/Site

Blood	Neuroinvasive	Sterile site
CNS	Neurological	Stool
CSF	Non-neurological	Urine
Food	Ophthalmic	Wound
Genital	Oral	
Invasive	Rectal	

Case Details (Will not appear as part of condition name)

CASE CLASSIFICATION:	REPORTING METHOD:	DATE EFFECTIVE: <i>Enter date</i>
Confirmed	Aggregate Count	
Probable	Individual Case Report	
Suspect		