**Section 690.100 Diseases and Conditions**

The following notifiable diseases and conditions are declared to be infectious or communicable or of public health significance. Each suspected or diagnosed case shall be reported to the local health authority, which shall subsequently report each case to the Department. The method of reporting shall be as described in the individual Section for the disease or condition. Appropriate infection control standards shall be implemented for cases and contacts per existing infection prevention and control standard precautions and transmission-based protocols.

a) Class I(a)

The following diseases or conditions shall be reported immediately (within three hours) by telephone, upon initial clinical suspicion of the disease or condition, to the local health authority, which shall then report to the Department immediately (within three hours). This interval applies to primary reporters identified in Section 690.200(a)(1) who are required to report to local health authorities and to local health authorities that are required to report to the Department. The Section number associated with each of the listed diseases or conditions indicates the Section under which the diseases or conditions are reportable. Laboratory specimens of agents required to be submitted under Subpart D shall be submitted within 24 hours to the Department laboratory.

|  |  |  |
| --- | --- | --- |
| 1) | Any unusual case of a disease or condition not listed in this Part that is of urgent public health significance | 690.295 |
|  |  |  |
| 2) | Anthrax\* | 690.320 |
|  |  |  |
| 3) | Botulism, foodborne | 690.327 |
|  |  |  |
| 4) | Brucellosis\* (if suspected to be a bioterrorist event or part of an outbreak) | 690.330 |
|  |  |  |
| 5) | Coronavirus, Novel, including Severe Acute Respiratory Syndrome (SARS) and Middle Eastern Respiratory Syndrome (MERS) | 690.361 |
|  |  |  |
| 6) | Diphtheria\* | 690.380 |
|  |  |  |
| 7) | Influenza A, Novel or Variant Virus\* | 690.469 |
|  |  |  |
| 8) | Measles, suspect, probable or confirmed\* | 690.520 |
|  |  |  |
| 9) | Plague\* | 690.570 |
|  |  |  |
| 10) | Poliomyelitis | 890.580 |
|  |  |  |
| 11) | Q-fever\* (if suspected to be a bioterrorist event or part of an outbreak) | 690.595 |
|  |  |  |
| 12) | Smallpox | 690.650 |
|  |  |  |
| 13) | Tularemia\* (if suspected to be a bioterrorist event or part of  an outbreak) | 690.725 |
|  |  |  |
| 14) | Any suspected bioterrorist threat or event | 690.800 |

b) Class I(b)

The following notifiable diseases or conditions shall be reported as soon as possible during normal business hours, but within 24 hours (i.e., within eight regularly scheduled business hours after identifying the case), to the local health authority, which shall then report to the Department as soon as possible, but within 24 hours. This interval applies to primary reporters identified in Section 690.200(a)(1) who are required to report to local health authorities and to local health authorities that are required to report to the Department. The Section number associated with each of the listed diseases and conditions indicates the Section under which the diseases and conditions are reportable. Laboratory specimens of agents required to be submitted under Subpart D shall be submitted within three days after identification of the organism to the Department laboratory.

|  |  |  |
| --- | --- | --- |
| 1) | Acute Flaccid Myelitis (AFM) | 690.290 |
|  |  |  |
| 2) | Botulism, intestinal, wound, and other | 690.327 |
|  |  |  |
| 3) | Brucellosis\* (if not suspected to be a bioterrorist event or part of an outbreak) | 690.330 |
|  |  |  |
| 4) | Chickenpox (Varicella) | 690.350 |
|  |  |  |
| 5) | Cholera\* | 690.360 |
|  |  |  |
| 6) | Cronobacter, including *C. sakazakii* and *C. malonaticus,* in infants younger than 12 months of age | 690.362 |
|  |  |  |
| 7) | Escherichia coli infections\* (E. coli O157:H7 and other Shiga toxin-producing E. coli) | 690.400 |
|  |  |  |
| 8) | Haemophilus influenzae, invasive disease\* | 690.441 |
|  |  |  |
| 9) | Hantavirus pulmonary syndrome\* | 690.442 |
|  |  |  |
| 10) | Hemolytic uremic syndrome, post-diarrheal | 690.444 |
|  |  |  |
| 11) | Hepatitis A | 690.450 |
|  |  |  |
| 12) | Melioidosis due to *Burkholderia pseudomallei* | 690.530 |
|  |  |  |
| 13) | Mumps | 690.520 |
|  |  |  |
| 14) | Neisseria meningitidis*,* invasive disease and purpura fulminans \* | 690.555 |
|  |  |  |
| 15) | Any Suspected or Confirmed Outbreak of a Disease of Known or Unknown Etiology that may be a Danger to the Public Health, Whether the Disease, Infection, Microorganism, or Condition is specified in the Rule (including, but not limited to, foodborne, healthcare-associated, zoonotic disease, and waterborne outbreaks) | 690.565 |
|  |  |  |
| 16) | Pertussis (whooping cough) | 690.750 |
|  |  |  |
| 17) | Q-fever due to Coxiella burnetii\* (if not suspected to be a bioterrorist event or part of an outbreak) | 690.595 |
|  |  |  |
| 18) | Rabies, human | 690.600 |
|  |  |  |
| 19) | Rabies, potential human exposure and animal rabies | 690.601 |
|  |  |  |
| 20) | Rubella | 690.620 |
|  |  |  |
| 21) | SARS-CoV-2 Infection (COVID-19) (Laboratory Confirmed Testing via ELR only, Pediatric Deaths, and Intensive Care Unit Admissions) | 690.635 |
|  |  |  |
| 22) | Staphylococcus aureus infections with intermediate or high level resistance to Vancomycin\* | 690.661 |
|  |  |  |
| 23) | Tularemia\* (if not suspected to be a bioterrorist event or part of an outbreak) | 690.725 |
|  |  |  |
| 24) | Typhoid fever\* and Paratyphoid fever (including S. Typhi, S. Paratyphi A, S. Paratyphi B (tartrate negative) and S. Paratyphi C cases) | 690.730 |
|  |  |  |
| 25) | Typhus | 690.740 |

c) Class II

The following notifiable diseases and conditions shall be reported as soon as possible during normal business hours, but within three days, to the local health authority, which shall then report to the Department as soon as possible during normal business hours but within three additional days. The Section number associated with each of the listed diseases and conditions indicates the Section under which the diseases are reportable. Laboratory specimens of agents required to be submitted under Subpart D shall be submitted within three days after identification of the organism to the Department laboratory.

|  |  |  |
| --- | --- | --- |
| 1) | Arboviral Infection\* | 690.322 |
|  |  |  |
| 2) | Campylobacteriosis | 690.335 |
|  |  |  |
| 3) | Cryptosporidiosis | 690.365 |
|  |  |  |
| 4) | Cyclosporiasis | 690.368 |
|  |  |  |
| 5) | Hepatitis B | 690.451 |
|  |  |  |
| 6) | Hepatitis C | 690.452 |
|  |  |  |
| 7) | Histoplasmosis | 690.460 |
|  |  |  |
| 8) | Influenza (Laboratory Confirmed Deaths in persons younger than 18 years of age) | 690.465 |
|  |  |  |
| 9) | Influenza (Laboratory Confirmed Testing via ELR only and Intensive Care Unit Admissions) | 690.468 |
|  |  |  |
| 10) | Legionellosis\* | 690.475 |
|  |  |  |
| 11) | Leptospirosis\* | 690.490 |
|  |  |  |
| 12) | Listeriosis\* | 690.495 |
|  |  |  |
| 13) | Malaria\* | 690.510 |
|  |  |  |
| 14) | Multi-drug resistant organisms considered to be of epidemiologic importance due to either severity of clinical disease, potential for transmission of genetic elements, or opportunities for effective control efforts | 690.445 |
|  |  |  |
| 15) | Psittacosis due to Chlamydia psittaci | 690.590 |
|  |  |  |
| 16) | Respiratory Syncytial Virus (RSV) Infection (Laboratory Confirmed Testing via ELR only, Pediatric Deaths, and Intensive Care Unit Admissions) | 690.605 |
|  |  |  |
| 17) | Salmonellosis\* including Paratyphi V var. L(+) tartrate+ (other than S. Typhi, S. Paratyphi A., S Paratyphi B (tartrate negative) and S. Paratyphi C cases) | 690.630 |
|  |  |  |
| 18) | SARS-CoV-2 Infection (COVID-19) (Laboratory Confirmed Testing via ELR only, Pediatric Deaths, and Intensive Care Unit Admissions) | 690.635 |
|  |  |  |
| 19) | Shigellosis\* | 690.640 |
|  |  |  |
| 20) | Streptococcal infections, Group A, invasive and sequelae to Group A streptococcal infections In Persons Admitted to the Hospital or Residing in a Residential Facility, including antibiotic susceptibility test results | 690.670 |
|  |  |  |
| 21) | Toxic shock syndrome due to Staphylococcus aureus infection | 690.695 |
|  |  |  |
| 22) | Streptococcus pneumoniae, invasive disease in children younger than five years | 690.678 |
|  |  |  |
| 23) | Tetanus | 690.690 |
|  |  |  |
| 24) | Tickborne Infections, including African Tick Bite Virus, Anaplasmosis, Babesiosis, Bourbon Virus, Ehrlichiosis, Heartland Virus, Lyme disease, and Spotted Fever Rickettsiosis | 690.698 |
|  |  |  |
| 25) | Trichinosis | 690.710 |
|  |  |  |
| 26) | Vibriosis (Other than Toxigenic Vibrio cholera O1 or O139)\* | 690.745 |

\* Diseases or conditions for which laboratories are required to forward clinical materials to the Department's laboratory in accordance with Subpart D of this Part.

d) When an epidemic of a disease or conditions dangerous to the public health occurs, and present rules are not adequate for its control or prevention, the Department shall issue more stringent requirements.

(Source: Amended at 48 Ill. Reg. 15900, effective October 23, 2024)