Peoria County healthcare providers, hospitals, and laboratories must report any suspected or confirmed case of these diseases to the Peoria City/County Health Department (phone numbers listed below) within the number of hours or days indicated.

**IMMEDIATE** Within 3 hours call 309/679-6655 • Monday – Friday, 8:00AM – 4:30PM.
After Hours call 309/679-6000

- Any suspected bioterrorist threat
- Any unusual case or cluster of cases that may indicate a public health hazard
- Anthrax
- Botulism, foodborne
- Brucellosis (if bioterrorism suspected)
- Diphtheria
- Influenza A, variant
- Plague
- Poliomyelitis
- Q Fever (if bioterrorism suspected)
- Severe Acute Respiratory Syndrome (SARS)
- Smallpox
- Tularemia (if bioterrorism suspected)

**24 HOURS** Within 24 hours call 309/679-6655 • Monday – Friday, 8:00AM – 4:30PM.
After Hours call 309/679-6000

- Botulism (infant, wound, other)
- Brucellosis (unless bioterrorism suspected, then immediately)
- Cholera
- *Escherichia coli* infections (*E. coli* O157:H7 and other shiga-toxin producing
  *E. coli*, enterotoxigenic *E. coli*, enteropathogenic *E. coli* and enteroinvasive *E. coli*)
- Foodborne or waterborne outbreaks
- Haemophilus influenzae, invasive
- Hantavirus pulmonary syndrome
- Hemolytic uremic syndrome, post-diarreal
- Hepatitis A
- Influenza, intensive care unit (ICU) admission
- Measles (rubeola)
- Mumps
- *Neisseria meningitidis*, invasive
- Outbreaks of public health significance
- Pertussis (whooping cough)
- Q fever (unless bioterrorism suspected, then immediately)
- Rabies, human, potential human exposure and animal rabies
- Rubella
- Smallpox vaccination, complications of
- *Staphylococcus aureus*, methicillin resistant (MRSA) clusters of 2 or more laboratory confirmed cases occurring in community settings (including, but not limited to, schools, correctional facilities, day care settings, and sports teams)
- *Staphylococcus aureus*, methicillin resistant (MRSA), occurring in infants under 61 days of age
- *Staphylococcus aureus* infections with intermediate or high level resistance to vancomycin
- Streptococcal infections, group A, invasive (including streptococcal toxic shock syndrome and necrotizing fasciitis)
- Tularemia (unless bioterrorism suspected, then immediately)
- Typhoid fever
- Typhus
- Varicella (chickenpox)

**7 DAYS** Call 309/679-6655 • Monday – Friday, 8:00AM – 4:30PM.

- Arboviral infections (including, but not limited to, California encephalitis, Chikungunya fever, Dengue fever, St. Louis encephalitis, and *West Nile virus*)
- Chancroid
- Chlamydia
- Creutzfeldt-Jakob disease (CJD)
- Cryptosporidiosis
- Cyclosporiasis
- Drug-resistant organism, extensively
- Gonorrhea
- Hepatitis B
- Hepatitis C
- Hepatitis D
- Histoplasmosis
- HIV infection
- Influenza, death (in persons less than 18 years of age)
- Legionellosis
- Leprosy
- Leptospirosis
- Listeriosis
- Malaria
- Ophthalmia neonatorum (gonococcal)
- Psittacosis
- Reye syndrome
- Salmonellosis, other than typhoid fever
- Shigellosis
- Streptococcus pneumoniae, invasive disease in children less than 5 years of age
- Syphilis
- Tetanus
- Tickborne disease (includes anaplasmosis, babesiosis, ehrlichiosis, *Lyme disease*, Rocky Mountain spotted fever, and Spotted fever rickettsioses)
- Toxic shock syndrome due to *Staphylococcus aureus*
- Trichinosis (or trichinellosis)
- Tuberculosis
- Vibriosis (non-cholera)
- Yersiniosis