



Diseases of Public Health Significance (Reportable Diseases) Notification Form - EXTERNAL

Last revised:
March 2019

(see reverse for list of Diseases of Public Health Significance)

Telephone: 1-877-464-9675 x 73588 Fax: 905-898-5213

After Hours: 905-953-6478 (after 4:30 p.m., weekends, holidays)

Reporting Source		
Name:	Report Date (Y/M/D):	Time:
Agency and Position:	Phone Number:	

Client Information		
Suspected Organism/Disease:		
Last Name:	First Name:	
Date of Birth (Y/M/D):	Gender: <input type="checkbox"/> F <input type="checkbox"/> M <input type="checkbox"/> Unknown	
Telephone:	Cell Number:	
Address:	City:	Postal Code:
Parent/Guardian/Next of Kin (if applicable):		
Attending Physician:	Telephone:	
Family Physician:	Telephone:	

Diagnostic Information	Clinically Diagnosed	Laboratory Confirmation
Specimen Type/Site:	Specimen ID	Date of Collection (Y/M/D):
Result(s):		Date of Result(s) (Y/M/D):

Clinical Information	
Symptoms:	Onset Date (Y/M/D):
Relevant Medical History:	Date of Death, if applicable (Y/M/D):

Hospitalization & Treatment	
Name of Hospital: <input type="checkbox"/> Mackenzie Health <input type="checkbox"/> Markham Stouffville <input type="checkbox"/> Southlake Regional <input type="checkbox"/> Other (please specify):	
<input type="checkbox"/> ER/Outpatient	Date of Visit (Y/M/D):
<input type="checkbox"/> Hospitalized	Admission Date (Y/M/D):
<input type="checkbox"/> Transported by EMS	Discharge Date (Y/M/D):
Treatment:	
EMS Run Number:	
Start Date (Y/M/D):	

Comments (e.g., risk factors, relevant medical history, travel, possible exposures, immunization history, contacts, pregnant)

For CID Use Only:	Received By (Name):	
Received By: <input type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Mail	Received Date (Y/M/D):	Time:

This information is being collected under the authority of the Health Protection and Promotion Act, R.S.O. 1990, c.H.7 for the purpose of case management and case investigations, client follow up and monitoring, contact tracing, public health administration and the provision of statistical data to the Ministry of Health and Long-Term Care. Information will be retained, used, disclosed and disposed of in accordance with the Personal Health Information Protection Act, 2004, S.O. 2004, c. 3. Any questions regarding this collection may be directed to the Privacy Officer, located at 520 Cane Parkway, Newmarket, Ontario, L3Y 8T5, (905) 830-4444 ext. 74004. **The information contained in this transmission is confidential and intended only for the use of the individual or entity to whom it is addressed. If you have received this transmission in error, please notify us immediately by telephone and return the original transmission to us by mail without making a copy. Thank you for your assistance.**

DISEASES OF PUBLIC HEALTH SIGNIFICANCE (REPORTABLE DISEASES)

Timely reporting of communicable diseases is essential for their control

If you suspect or have confirmation of any of the following diseases of public health significance or their etiologic agents (Ontario Reg. 135/18 and recent amendments to the *Health Protection and Promotion Act*) please report to the local Medical Officer of Health. **Diseases marked with an asterisk * should be reported immediately to the Medical Officer of Health by telephone (24 hours a day, 7 days a week).**

Diseases of public health significance can be reported:

By fax: 905-898-5213

By phone, Monday to Friday 8:30 a.m. to 4:30 p.m.: 1-877-464-9675 ext. 73588

Afterhours, after 4:30 p.m. Monday to Friday and 24 hours per day on weekends/holidays: 905-953-6478

Acquired Immunodeficiency Syndrome (AIDS)	* Food Poisoning, all causes	* Meningococcal disease, invasive
Acute Flaccid Paralysis (AFP)	* Gastroenteritis outbreaks in institutions and public hospitals	* Mumps
Amebiasis	Giardiasis, except asymptomatic cases	Ophthalmia neonatorum
* Anthrax	Gonorrhea	* Paralytic Shellfish Poisoning
Blastomycosis	* Group A Streptococcal disease, invasive	* Paratyphoid Fever
* Botulism	Group B Streptococcal disease, neonatal	* Pertussis (Whooping Cough)
* Brucellosis	* Haemophilus influenzae disease, all types, invasive	* Plague
<i>Campylobacter</i> enteritis	* Hantavirus pulmonary syndrome	Pneumococcal disease, invasive
Carbapenemase-producing <i>Enterobacteriaceae</i> (CPE) infection or colonization	* Hemorrhagic fevers, including:	* Poliomyelitis, acute
Chancroid	i. Ebola virus disease	Psittacosis/Ornithosis
Chickenpox (Varicella)	ii. Lassa Fever	* Q Fever
<i>Chlamydia trachomatis</i> infection	iii. Marburg virus disease	* Rabies
* Cholera	iv. Other viral causes	* Respiratory infection outbreaks in institutions and public hospitals
* Clostridium difficile associated disease (CDAD) outbreaks and outbreak associated cases in public hospitals	Hepatitis, viral:	* Rubella
* Creutzfeldt-Jakob Disease (CJD), all types	i. *Hepatitis A	Rubella, congenital syndrome
Cryptosporidiosis	ii. Hepatitis B	Salmonellosis
Cyclosporiasis	iii. Hepatitis C	* Severe Acute Respiratory Syndrome (SARS)
* Diphtheria	Influenza	* Shigellosis
<i>Echinococcus multilocularis</i> infection	* Legionellosis	* Smallpox
Encephalitis, including:	Leprosy	Syphilis
i. *Primary, viral	* Listeriosis	Tetanus
ii. Post-infectious	Lyme disease	Trichinosis
iii. Vaccine-related	* Measles	Tuberculosis+
iv. Subacute sclerosing panencephalitis	* Meningitis, acute:	* Tularemia
v. Unspecified	i. *Bacterial	* Typhoid Fever
	ii. Viral	* Verotoxin-producing E. coli infection indicator conditions, including Haemolytic Uraemic Syndrome (HUS)
	iii. Other	* West Nile Virus illness
		Yersiniosis

Note:

+ Latent Tuberculosis Infection (LTBI) is also reportable to the Medical Officer of Health

YORK REGION PUBLIC HEALTH

9060 Jane Street

Vaughan, Ontario L4K 0G5

Phone: 1-877-464-9675 ext. 73588

Fax: 905-898-5213

york.ca

Rev: 03-19