



Communicable Disease Reporting in Montana

Suspected or confirmed cases of the following diseases must be reported to your [local or tribal health department](#), per [ARM 37.114.201](#). Additionally reportable is any unusual incident or unexplained illness or death in a human or animal with potential human health implications, per [ARM 37.114.203](#). If your Local or Tribal Public Health Jurisdiction is unavailable, call 406-444-0273 (*available 24/7*).

Acquired Immune Deficiency Syndrome (AIDS)	Lyme disease
Acute flaccid myelitis (AFM) ^①	Lymphogranuloma venereum
Anthrax ^①	Malaria
Arboviral diseases, neuroinvasive and nonneuroinvasive ^① (California serogroup, Chikungunya, Eastern equine encephalitis, Oropouche, Powassan, St. Louis encephalitis, West Nile virus, Western equine encephalitis, Zika virus infection)	Measles (rubeola) ^①
Arsenic poisoning (urine levels ≥ 70 micrograms/liter total arsenic or ≥ 35 micrograms/liter methylated plus inorganic arsenic)	Melioidosis ^①
Babesiosis	Meningococcal disease (<i>Neisseria meningitidis</i>) ^①
Botulism (infant, foodborne, wound, and other) ^①	Mercury poisoning (urine level ≥ 10 micrograms/liter or urine level ≥ 10 micrograms/liter elemental mercury/gram of creatinine or blood level ≥ 10 micrograms/liter elemental, organic, and inorganic mercury)
Brucellosis ^①	Mpox
Cadmium poisoning (blood level ≥ 5 micrograms/liter or urine level ≥ 3 micrograms/liter)	Multisystem inflammatory syndrome in children (MIS-C)
Campylobacteriosis	Mumps
<i>Candida auris</i> ^①	Novel influenza A virus infections ^①
Carbapenemase-producing organisms (CPO) ^①	Pertussis
Chancroid	Plague (<i>Yersinia pestis</i>) ^①
<i>Chlamydia trachomatis</i> infection	Poliomyelitis ^①
Cholera ^①	Psittacosis
Coccidioidomycosis	Q Fever (<i>Coxiella burnetii</i>), acute and chronic
Colorado tick fever	Rabies, human ^① and animal (including exposure to a human by a species susceptible to rabies infection)
COVID-19-associated hospitalizations and deaths	Respiratory syncytial virus (RSV)-associated death in a person less than 18 years of age;
<i>Cronobacter</i> in infants ^①	Rickettsial diseases (including spotted fevers, flea-borne typhus, scrub typhus, anaplasmosis, and ehrlichiosis)
Cryptosporidiosis	Rubella, including congenital ^①
Cyclosporiasis	Salmonellosis (including <i>Salmonella</i> Typhi and Paratyphi) ^①
Dengue virus infection	Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV) disease ^①
Diphtheria ^①	Shigellosis ^①
<i>Escherichia coli</i> , Shiga toxin-producing (STEC) ^①	Smallpox ^①
Gastroenteritis outbreak	<i>Streptococcus pneumoniae</i> , invasive disease
Giardiasis	Streptococcal toxic shock syndrome (STSS)
Gonorrhea	Syphilis
Granuloma inguinale	Tetanus
Group A <i>Streptococcus</i> , invasive disease	Tickborne relapsing fever
<i>Haemophilus influenzae</i> , invasive disease ^①	Toxic shock syndrome, non-streptococcal (TSS)
Hantavirus pulmonary syndrome/infection ^①	Transmissible spongiform encephalopathies (including Creutzfeldt Jakob Disease)
Hemolytic uremic syndrome, post diarrheal	Trichinellosis (Trichinosis) ^①
Hepatitis A, acute	Tuberculosis ^① (including latent tuberculosis infection)
Hepatitis B, acute, chronic, perinatal	Tularemia ^①
Hepatitis C, acute, chronic, perinatal	Varicella (chickenpox)
Human Immunodeficiency Virus (HIV)	Vibriosis ^①
Influenza-associated hospitalizations and deaths	Viral hemorrhagic fevers ^①
Lead levels in a capillary blood specimen ≥ 3.5 micrograms per deciliter in a person less than 16 years of age	Yellow fever
Lead levels in a venous blood specimen at any level	Outbreak in an institutional or congregate setting
Legionellosis	Any unusual incident of illness or death in a human or animal with potential human health implications
Leprosy (Hansen's disease)	
Leptospirosis	
Listeriosis ^①	

Additional Laboratory Requirements for submission of Selected Specimens/Reports:

^① a specimen must be sent to the Montana Public Health Laboratory for confirmation, per [ARM 37.114.313](#). **Influenza specimens** may be requested for confirmation of severe presentations/mortality and outbreaks, or subtyping for surveillance purposes. Additional specimens may be requested by CDEpi. For additional information, contact the [Montana Public Health Laboratory at 1-800-821-7284](#).

Isolates: In addition to selected conditions noted above, suspected or confirmed isolates of Multidrug-Resistant Organisms (MDRO) of significance, including Carbapenem-resistant organisms (CRO), Vancomycin-intermediate or resistant *Staphylococcus aureus* (VISA or VRSA) must be sent to MTPHL for confirmation, when possible.

[ARM 37.114.313](#): In the event of an outbreak, emergence of a communicable disease or a disease of public health importance, specimens must be submitted at the request of the department until a representative sample has been reached as determined by the department.