2014 Event Code List
Nationally Notifiable Diseases and Other Conditions of Public Health Importance
Division of Health Informatics and Surveillance
Center for Surveillance, Epidemiology, and Laboratory Services
Centers for Disease Control and Prevention
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Each disease or condition reported to CDC's National Notifiable Diseases Surveillance System (NNDSS) is assigned an event code, as per this document. Event codes are used by local, state, and federal surveillance information systems to help simplify storage and retrieval of information about cases of nationally notifiable or state reportable diseases or conditions. This event code list summarizes the verification and publication criteria used by CDC's NNDSS.

Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10245	African Tick Bite Fever			
11040	Amebiasis	Deleted from NNDL in 1995.		
11090	*Anaplasma phagocytophilum**	Added to NNDL in 2008. Replaced event code 11085.		Confirmed and probable; unknown from CA
10350	**Anthrax***	Case definition changed, 2010.

CSTE recommends immediate (extremely urgent) notification for anthrax when:
a) source of infection is not recognized,
b) a recognized bioterrorism exposure or potential mass exposure exists,
c) there is serious illness of naturally-occurring anthrax.

CSTE recommends immediate (urgent) notification when there is naturally-occurring or occupational anthrax, responding to treatment. | Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation by OID/NCEZID. Following these procedures, all cases meeting print criteria will be printed. | Confirmed and probable; unknown from CA |
| 10010 | Aseptic meningitis | Deleted from NNDL in 1995. | | |
| 32020 | Asthma, Work-related | | | |

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
12010	**Babesiosis***	Added to NNDL in 2011.		Confirmed and probable; unknown from CA

Confirmed and probable case classifications will be distinguished from each other in the annual summary, not the weekly tables. |
| 10650 | Bacterial meningitis, other | Extended record format available for NETSS transmission. | | |
| 10530 | **Botulism, foodborne*** | CSTE recommends immediate (extremely urgent) notification for foodborne botulism, except for cases endemic to Alaska. | | Confirmed; unknown from CA |
| 10540 | **Botulism, infant*** | CSTE recommends immediate (extremely urgent) notification for:
a) infant botulism clusters or outbreaks,
b) botulism cases of intentional or suspected intentional release,
c) botulism cases of unknown etiology or cases which do not meet standard notification criteria.

CSTE recommends standard notification for sporadic infant botulism. | | Confirmed; unknown from CA |

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10550	**Botulism, other (includes wound)***	Codes 10548 and 10549 can be used to track "other unspecified" and "wound" botulism separately. Event code 10550 should only be used by states who cannot report separately using codes 10548 and 10549. CSTE recommends immediate (extremely urgent) notification for: a) intentional or suspected intentional release, b) cases of unknown etiology or cases which do not meet standard notification criteria. Standard notification is recommended for sporadic wound botulism cases. Wound botulism case definition changed, 2011.		Confirmed; unknown from CA
10548	**Botulism, other unspecified***	Use code 10548 if you can differentiate "other unspecified" botulism from "wound" botulism; otherwise, use code 10550. CSTE recommends immediate (extremely urgent) notification for: a) intentional or suspected intentional release b) cases of unknown etiology or cases which do not meet standard notification criteria.		Confirmed; unknown from CA

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10549	**Botulism, wound***	Use code 10549 if you can differentiate "wound" botulism from "other unspecified" botulism; otherwise, use code 10550. CSTE recommends immediate (extremely urgent) notification for botulism, when: a) there is an intentional or suspected intentional release b) there are cases of unknown etiology or cases which do not meet standard notification criteria. CSTE recommends standard notification for sporadic cases of wound botulism. Case definition changed, 2011.		Confirmed; unknown from CA
10020	**Brucellosis***	Case definition changed, 2010. CSTE recommends immediate (urgent) notification for multiple cases that are temporally or spatially clustered and standard notification for cases that are not temporally or spatially clustered.		Confirmed and probable; unknown from CA
10058	Cache Valley virus neuroinvasive disease	Formerly 'encephalitis/meningitis Cache Valley'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10066	Cache Valley virus non-neuroinvasive disease	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
10054	**California serogroup virus neuroinvasive disease***	Use code 10078 when reporting Jamestown Canyon virus neuroinvasive disease. Added to NNDL in 1995 (see Encephalitis, primary, 10050). Formerly 'encephalitis/meningitis California serogroup viral'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET
10061	**California serogroup virus non-neuroinvasive disease***	Use code 10079 when reporting Jamestown Canyon virus non-neuroinvasive disease. Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET
11020	Campylobacteriosis	Case definition changed, 2012.		

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10273	**Chancroid***	Extended record format available for STD line-listed data transmitted through NETSS.		All reports are printed.
10274	*Chlamydia trachomatis* **infection***	Added to NNDL in 1995. Extended record format available for STD line-listed data transmitted through NETSS. Changed name from "Chlamydia trachomatis genital infection" to "Chlamydia trachomatis infection" in 2010.		All reports are printed.
10470	**Cholera (toxigenic *Vibrio cholerae* O1 or O139)***		All reports are printed. Before printing, the existence of "toxigenic O1 or O139" serospecies and other information in the report of a provisional case is verified with the State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation by OID/NCEZID.	Confirmed; unknown from CA verified as confirmed
11900	**Coccidioidomycosis***	Added to NNDL in 1995. Case definition changed, 2008. Deleted from NNDL in 2010. Added to NNDL in 2011.		Confirmed; unknown from CA
11580	**Cryptosporidiosis***	Added to NNDL in 1995. Case definition changed, 2009. Case definition changed, 2011. Case definition changed, 2012.		Confirmed and probable; unknown from CA Confirmed and probable case classifications will be distinguished from each other in the annual summary, not the weekly tables.
11575	**Cyclosporiasis***	Added to NNDL in 1999. Case definition changed, 2010.		Confirmed and probable; unknown from CA

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10680	**Dengue fever (DF)***	Added to NNDL in 2010. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Initially, was referred to as 'dengue fever' and then subsequently referred to as 'dengue.' As of January 1, 2010, dengue fever is readopted as the preferred terminology.		Confirmed and probable Print cases of DF, DHF, and DSS together; the CDC program will add a footnote with the proportion of cases
10685	**Dengue hemorrhagic fever (DHF)***	Added to NNDL in 2010. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		Confirmed and probable Print cases of DF, DHF, and DSS together; the CDC program will add a footnote with the proportion of cases
	Dengue shock syndrome (DSS)*	Added to NNDL in 2010. DSS should be reported as dengue hemorrhagic fever. CDC program will follow-up to determine if a case is DSS. These data are reported to CDC through ArboNET and should not be reported through NETSS.		
10040	**Diphtheria***	There is no disease-specific extended record transmitted through NETSS for this condition. CSTE recommends immediate urgent notification.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; following these procedures, all cases meeting print criteria will be printed.	Cases with confirmed, probable, and unknown case status are printed.

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10053	**Eastern equine encephalitis virus neuroinvasive disease***	Added to NNDL in 1995 (see Encephalitis, primary, 10050). Formerly 'encephalitis/meningitis, eastern equine'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Case definition revision 2011. Case definition changed, 2014		Data for publication received from ArboNET
10062	**Eastern equine encephalitis virus non-neuroinvasive disease***	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005. Case definition revision 2011. Case definition changed, 2014		Data for publication received from ArboNET
11088	***Ehrlichia chaffeensis****	Added to NNDL in 2008. Replaced event code 11086.		Confirmed and probable; unknown from CA
11089	***Ehrlichia ewingii****	Added to NNDL in 2008. Replaced event code 11087.		Confirmed and probable; unknown from CA
11085	Ehrlichiosis, human granulocytic (HGE)	Added to NNDL in 1998. As of January 1, 2008, HGE code 11085 was retired and a new code for *Anaplasma phagocytophilum* (see code 11090) should be used for reporting.		
11086	Ehrlichiosis, human monocytic (HME)	Added to NNDL in 1998. As of January 1, 2008, HME code 11086 was retired and a new code for *Ehrlichia chaffeensis* (see code 11088) should be used for reporting.		

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11087	Ehrlichiosis, human, other or unspecified agent	Added to NNDL in 2001. As of January 1, 2008, Ehrlichiosis code 11087 was retired and new codes for *Ehrlichia ewingii* and ehrlichiosis/anaplasmosis, undetermined (see codes 11089 and 11091) should be used for reporting.		
11091	**Ehrlichiosis/Anaplasmosis, undetermined***	Added to NNDL in 2008. Replaced event code 11087.		Confirmed and probable; unknown from CA
10070	Encephalitis, post-chickenpox	Deleted from NNDL in 1995.		
10080	Encephalitis, post-mumps	Deleted from NNDL in 1995.		
10090	Encephalitis, post-other	Deleted from NNDL in 1995.		
10050	Encephalitis, primary	Deleted from NNDL in 1995. Replaced by event codes 10051-10058.		
11562	Enterohemorrhagic *Escherichia coli* (EHEC) shiga toxin+ (serogroup non-O157)	Added to NNDL in 2001. As of January 1, 2006, EHEC codes 11560, 11562, and 11564 were retired and a new code for Shiga toxin-producing *Escherichia coli* (see code 11563) should be used for reporting.		All reports printed
11560	Enterohemorrhagic *Escherichia coli* (EHEC) O157:H7	Added to NNDL in 1994. As of January 1, 2006, EHEC codes 11560, 11562, and 11564 were retired and a new code for Shiga toxin-producing *Escherichia coli* (see code 11563) should be used for reporting.		All reports printed
11564	Enterohemorrhagic *Escherichia coli* (EHEC) shiga toxin+ (not serogrouped)	Added to NNDL in 2001. As of January 1, 2006, EHEC codes 11560, 11562, and 11564 were retired and a new code for Shiga toxin-producing *Escherichia coli* (see code 11563) should be used for reporting.		All reports printed

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10570	Flu activity code (Influenza)	Data collected for CDC program.		
11570	**Giardiasis***	Added to NNDL in 2002. Case definition change 2011.		Confirmed and probable; unknown from CA
10280	**Gonorrhea***	Extended record format available for STD line-listed data transmitted through NETSS.Case definition changed, 2014.		All reports are printed.
10276	Granuloma inguinale (GI)	The GI 10276 code retired as of January 1, 2014. Deleted from NNDL in 1995.		
10590	***Haemophilus influenzae,* invasive disease***	Extended record format available for NETSS transmission		Cases with confirmed, probable, and unknown case status are printed.
10380	**Hansen disease (Leprosy)***	Case definition changed, 2013.		Confirmed; unknown from CA
11610	Hantavirus infection	If infection results in illness meeting the hantavirus pulmonary syndrome case definition, use event code 11590 and do not report using code 11610. However, if patient has evidence of infection without meeting the hantavirus pulmonary syndrome case definition, report using 11610.		
11590	**Hantavirus pulmonary syndrome***	Added to NNDL in 1995. Case definition changed, 2010.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; Following these procedures, all cases meeting print criteria will be printed.	Confirmed and unknown from CA
42020	Head injury			
11550	**Hemolytic uremic syndrome postdiarrheal***	Added to NNDL in 1995.		Confirmed, probable, and unknown from CA

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10110	**Hepatitis A, acute***	Extended record format available for NETSS transmission. Case definition changed, 2011. Case definition changed, 2012.		Confirmed; unknown from CA
10105	**Hepatitis B virus infection, chronic***	Added to NNDL in 2003. Per CDC Hepatitis Program, data received since 2003 will not be re-released or published due to data quality concerns (e.g. duplicate reporting). Case definition changed, 2011. Case definition changed, 2012.		
10100	**Hepatitis B, acute***	Extended record format available for NETSS transmission. Case definition changed, 2011. Case definition changed, 2012.		Confirmed; unknown from CA
10104	**Hepatitis B, virus infection perinatal***	Event code 10100 was previously used for this condition. Data for this condition are not published.		
10106	**Hepatitis C virus, past or present***	Added to NNDL in 2003. Per CDC Hepatitis Program, data received since 2003 will not be re-released or published due to data quality concerns (e.g. duplicate reporting). Changed name from 'Hepatitis C virus infection, past or present' to 'Hepatitis C virus infection, chronic' in 2010. Case definition changed, 2011. Changed name from "Hepatitis C virus infection, chronic" to Hepatitis C virus infection, past or present" in 2011. Case definition changed, 2012.		

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10101	**Hepatitis C, acute***	Extended record format available for NETSS transmission. Case definition changed, 2011. Case definition changed, 2012.		Confirmed; unknown from CA
10102	Hepatitis Delta co- or super-infection, acute (Hepatitis D)	The Hepatitis D 10102 code retired as of January 1, 2014. Hepatitis D information is now collected as a co-morbidity of Hepatitis B, acute*.		
10103	Hepatitis E, acute	Data collected for CDC program. Extended record format available for NETSS transmission.		
10480	Hepatitis, non A, non B, acute	Deleted from NNDL in 2003. The Hepatitis non A/B 10480 code retired as of January 1, 2014.		
10120	Hepatitis, viral unspecified	Deleted from NNDL in 1995. The Hepatitis, viral unspecified 10120 code retired.as of January 1, 2014,		
10568	Human T-Lymphotropic virus type I infection (HTLV-I)			
10569	Human T-Lymphotropic virus type II infection (HTLV-II)			
11063	Influenza outbreak	Data collected for CDC program. This event code was created to distinguish data received by CDC from 11062 - Initial Detections of Novel Influenza A virus infections.		

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
11061	**Influenza-associated pediatric mortality***	**Only nationally notifiable in children < 18 years of age.** Influenza-associated pediatric mortality was added to the NNDL at the beginning of the flu season in October 2004. Data for pediatric influenza deaths are reported to OID/NCIRD Influenza Division via a web-based application. These data should NOT be reported through NETSS. CDC's web-based application limits entry of case reports to the current age group under surveillance. Note that the event code itself is not limited to that age group.		Cases with confirmed case status are printed.
10078	**Jamestown Canyon virus, neuroinvasive disease***	Use code 10078 when possible, rather than the broader category of 10054 for California serogroup virus neuroinvasive disease. These data are reported to CDC through ArboNET and should not be reported through NETSS. Case definition changed, 2014		
10079	**Jamestown Canyon virus, non-neuroinvasive disease***	Use code 10079 when possible, rather than the broader category of 10061 for California serogroup virus non-neuroinvasive disease. These data are reported to CDC through ArboNET and should not be reported through NETSS. Case definition changed, 2014		

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10059	Japanese encephalitis virus neuroinvasive disease	Formerly 'Japanese encephalitis'. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
10068	Japanese encephalitis virus non-neuroinvasive disease	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
50000	Kawasaki Disease			
10081	**LaCrosse virus neuroinvasive disease***	Use code 10081 when possible, rather than the broader category of 10054 for California serogroup virus neuroinvasive disease. These data are reported to CDC through ArboNET, Arboviral Case Notification (HL7) and should not be reported through NETSS. Case definition changed, 2014.		
10082	**LaCrosse virus non-neuroinvasive disease***	Use code 10082 when possible, rather than the broader category of 10061 for California serogroup virus non-neuroinvasive disease. Case definition changed, 2014		
32010	Lead poisoning			
10490	**Legionellosis***			Confirmed; unknown from CA
10390	**Leptospirosis***	Deleted from NNDL in 1995. Added to NNDL in 2014.		Confirmed and probable; unknown from CA
10640	**Listeriosis***	Added to NNDL in 2000. Extended record format available for NETSS transmission.		Confirmed; unknown from CA

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11080	**Lyme disease***	Extended record format available for NETSS transmission. Case definition changed, 2008. Case definition changed, 2011.		Confirmed and probable; unknown from CA
10306	Lymphogranuloma venereum (LGV)	The LGV 10306 code retired.as of January 1, 2014. Deleted from NNDL in 1995.		
10130	**Malaria***	Case definition changed, 2010. Case definition changed, 2014.		Confirmed; unknown from CA
10140	**Measles (rubeola), total***	Extended record format available for NETSS transmission. Case definition changed, 2009. Case definition changed, 2013. CSTE recommends immediate (urgent) notification.		Cases with confirmed and unknown case status are printed.
11585	Melioidosis	Condition placed under national surveillance by CSTE, 2012.		
10150	**Meningococcal disease (*Neisseria meningitidis*)***	Extended record format available for NETSS transmission.		Confirmed and probable; unknown from CA

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11661	Methicillin- or oxacillin-resistant *Staphylococcus aureus* coagulase-positive (MRSA a.k.a. ORSA)	OID/OPHRP is working to develop the capacity to support voluntary reporting of MRSA data through the NEDSS Base System. This will help to facilitate the collection and reporting of non-notifiable MRSA data to the NNDSS, by interested states. In addition, NCID currently collaborates with 8 Emerging Infections Program sites in the ABCs Surveillance System to monitor invasive MRSA. States interested in using the ABCs protocol and methods are welcomed to contact Dr. Scott Fridkin (SFridkin@cdc.gov, or by phone at 404-639-2603). Findings gathered from both surveillance systems (ABCs and NNDSS) will be used to inform CSTE's decision whether MRSA (ORSA) should be added to the list of nationally notifiable diseases.		

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11064	Middle East Respiratory Syndrome Coronavirus (MERS-CoV) Infection	Event code 11064 for Middle East Respiratory Syndrome Coronavirus (formerly called *Novel Coronavirus*) has been created for use in state and territorial integrated surveillance information systems and should be used with the following surveillance case definition (http://www.cdc.gov/coronavirus/mers/case-def.html). While this code has been added to the 2013 event code list, this condition is NOT nationally notifiable and case notifications for this condition should not be submitted to the NNDSS. Instead, please refer to the Interim Guidance for State and Local Health Departments for reporting patients under investigation for MERS-CoV infection to CDC (http://www.cdc.gov/coronavirus/mers/guidance.html).		
11801	Monkeypox			
42040	Motor vehicle injury	Data for this event are not currently transmitted through NETSS.		
10308	Mucopurulent cervicitis (MPC)	The MPC 10308 code retired.as of January 1, 2014.		
10180	**Mumps***	Extended record format available for NETSS transmission. Case definition changed, 2008. Refer to case definition for case classification for import status. Case definition changed, 2012.		Cases with confirmed, probable, and unknown case status are printed.

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10317	Neurosyphilis	The Neurosyphilis 10317 code retired as of January 1, 2014. Deleted from the NNDL in 2014. If there is neurological involvement that meets the "Neurosyphilis" case definition, send case notifications to NNDSS coded to the appropriate stage of syphilis and then code the neurological involvement variable to reflect either "Yes, confirmed" or "Yes, probable".		All reports are printed.
10307	Nongonococcal urethritis (NGU)	The NGU 10307 code retired.as of January 1, 2014		
11062	**Novel influenza A virus infections, initial detections of***	Added to NNDL in 2007. Case definition changed in 2013, as a result of an approved Interim CSTE position statement dated 8/8/2012 for this condition. The interim position statement was approved by CSTE's full membership in June 2013 and is the source for the 2014 case definition on the NNDSS case definitions web site. Thus the 2013 and 2014 case definitions on the NNDSS web site are identical. CSTE recommends immediate (urgent) notification.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation from OID/NCIRD. Following these procedures, all cases meeting the print criteria will be printed.	Cases with confirmed status and cases reported from CA with unknown status later verified to be confirmed are printed.
42060	Other injury			
10309	Pelvic Inflammatory Disease (PID), Unknown Etiology	The PID 10309 code retired.as of January 1, 2014.		

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10190	**Pertussis***	Extended record format available for NETSS transmission. Case definition changed, 2014.		Cases with confirmed, probable, and unknown case status are printed.
10440	**Plague***	CSTE recommends immediate (extremely urgent) notification when there is a suspected intentional release and standard notification for all cases not suspected to be intentional.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation by OID/NCEZID. Following these procedures, all cases meeting print criteria will be printed.	All reports are printed.
10410	**Poliomyelitis, paralytic***	There is no disease-specific extended record transmitted through NETSS for this condition. Note event code 10405 for poliovirus infection, nonparalytic. CSTE recommends immediate (extremely urgent) notification	Before printing, OID/NCIRD will verify case reports based on an expert panel review. Any case of polio will be withheld from publication pending receipt of OID expert panel review verification.	Confirmed; unknown from CA that are verified as confirmed
10405	**Poliovirus infection, nonparalytic***	Added to NNDL in 2007. Note event code 10410 for paralytic poliomyelitis. No disease-specific data for this condition are reported. CSTE recommends immediate (urgent) notification	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation by OID/NCIRD. Following these procedures, all cases meeting print criteria will be printed.	Confirmed; unknown from CA that are verified as confirmed

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10057	**Powassan virus neuroinvasive disease***	Added to NNDL in 2002. Formerly 'encephalitis/meningitis, Powassan'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET
10063	**Powassan virus non-neuroinvasive disease***	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET
10450	**Psittacosis (Ornithosis)***	Case definition changed, 2010.		Confirmed and probable; unknown from CA
10255	Q fever	Added to NNDL in 1999. As of January 1, 2008, event code 10255 was retired and new codes for Q fever, acute and chronic (see codes 10257 and 10258) should be used for reporting.		
10257	**Q fever, acute***	Added to NNDL in 2008. Replaced event code 10255 beginning January 1, 2008. Case definition changed, 2009.		Confirmed and probable; unknown from CA

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10258	**Q fever, chronic***	Added to NNDL in 2008. Replaced event code 10255 beginning January 1, 2008. Case definition changed, 2009.		Confirmed and probable; unknown from CA
10340	**Rabies, animal***	Animal species reportable in NETSS transmission. CSTE recommends standard notification for animal rabies cases not imported within past 60 days and immediate (urgent) notification for cases imported from outside the continental US within the past 60 days.		Confirmed and unknown from CA
10460	**Rabies, human***	Case definition changed, 2010. Case definition changed, 2011. CSTE recommends immediate (urgent) notification.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; Following these procedures, all cases meeting print criteria will be printed.	Confirmed; unknown from CA verified as confirmed
11030	Reye syndrome			
11050	Rheumatic fever	Deleted from NNDL in 1995.		
10200	**Rubella***	Extended record format available for NETSS transmission. Case definition changed, 2009. Case definition changed, 2013. CSTE recommends immediate (urgent) notification.		Cases with confirmed and unknown case status are printed.

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10370	**Rubella, congenital syndrome***		Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; Following these procedures, all cases meeting print criteria will be printed.	Cases with confirmed, probable, and unknown case status are printed.
11000	**Salmonellosis***	As of January 2006, serotype specific national reporting for salmonellosis was recommended by CSTE and CDC. Case definition changed, 2012.		Confirmed and probable; unknown from CA
10575	**Severe Acute Respiratory Syndrome (SARS)-associated Coronavirus disease (SARS-CoV)***	Data supplied to NNDSS by various reporting mechanisms, including NETSS and HL7 messaging via the Generic Message Mapping Guide. The SARS Web application is no longer available. CSTE recommends immediate (extremely urgent) notification.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation by OID/NCIRD. Following these procedures, all cases meeting print criteria will be printed.	Cases with confirmed and probable case status are printed.
11563	**Shiga toxin-producing *Escherichia coli* (STEC)***	As of January 2006, STEC was added to the NNDL and serotype specific national reporting of STEC was recommended by CSTE and CDC. As of January 2006, STEC code 11563 replaces EHEC codes 11560, 11562, and 11564. Case definition changed, 2014.		Cases with confirmed and probable case status are printed.
11010	**Shigellosis***	As of January 2006, serotype specific national reporting for shigellosis was recommended by CSTE and CDC. Case definition changed, 2012.		Confirmed and probable; unknown from CA

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
32000	**Silicosis***	Added to NNDL in 1996. Added case definition to NNDSS website, 2010. Cases are not reported via NETSS or NEDSS. Data are not published in the MMWR at this time.		
11800	**Smallpox***	Deleted from NNDL in 1988. Added to NNDL in 2004. CSTE recommends immediate (extremely urgent) notification.	Before printing, CDC staff will verify all provisional cases reported via consultation with State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation by OID/NCEZID. Following these procedures, all cases meeting print criteria will be printed.	Cases with confirmed and probable case status are printed.
42010	Spinal cord injury			
10250	**Spotted Fever Rickettsiosis***	Added to NNDL in 2010. Replaced event code 10250 for Rocky Mountain Spotted Fever.		Confirmed, probable, and unknown
10051	**St. Louis encephalitis virus neuroinvasive disease***	Added to NNDL in 1995 (see Encephalitis, primary, 10050). Formerly 'encephalitis/meningitis, St. Louis'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10064	**St. Louis encephalitis virus non-neuroinvasive disease***	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET
11710	Streptococcal disease, invasive, Group A	Added to NNDL in 1995. Deleted from NNDL in 2010.		
11715	Streptococcal disease, invasive, Group B			
11716	Streptococcal disease, other, invasive, beta-hemolytic (non-group A and non-group B)	Added for use in the National Electronic Disease Surveillance System Bacterial Meningitis and Invasive Respiratory Disease Program Area Module.		
11700	**Streptococcal toxic-shock syndrome***	Added to NNDL in 1995. Case definition changed, 2010.		Confirmed and probable; unknown from CA
11720	*Streptococcus pneumoniae* invasive, drug-resistant (DRSP), All age groups	Added to NNDL in 1995. Deleted from NNDL in 2010. Cases of invasive pneumococcal disease (IPD) are no longer classified separately by age or antimicrobial susceptibility. Event code (11723) should be used for notification of all cases of IPD starting on January 1, 2010.		

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
11723	***Streptococcus pneumoniae, invasive disease (IPD) (all ages)***	Added to NNDL in 2010. CDC program does not want to be notified of suspected cases. Replaced event codes for '*Streptococcus pneumoniae*, invasive, drug-resistant (DRSP), all age groups' (event code 11720) and '*Streptococcus pneumoniae*, invasive disease non-drug resistant (IPD), in children less than 5 years of age' (event code 11717).		Confirmed; unknown from CA
11717	*Streptococcus pneumoniae*, invasive disease non-drug resistant (IPD), < 5 years	Added to NNDL in 2001. Only nationally notifiable in children less than 5 years of age. Deleted from NNDL in 2010. Cases of invasive pneumococcal disease (IPD) are no longer classified separately by age or antimicrobial susceptibility. Event code (11723) should be used for notification of all cases of IPD starting on January 1, 2010.		
50010	Sudden Infant Death Syndrome			
42050	Suicide			
10316	**Syphilis, congenital***	Extended record format available for STD line-listed data transmitted through NETSS.		All reports are printed.
10313	**Syphilis, early latent***	Extended record format available for STD line-listed data transmitted through NETSS.		All reports are printed.

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10314	**Syphilis, late latent***	Extended record format available for STD line-listed data transmitted through NETSS.		All reports are printed.
10318	Syphilis, late with clinical manifestations other than neurosyphilis	Deleted from the NNDL in 2014. The Syphilis, late with clinical manifestations other than neurosyphilis 10318 code retired. as of January 1, 2014, (Refer to the related event code 10319 for Syphilis, late with clinical manifestations (including late benign syphilis and cardiovascular syphilis)")		All reports are printed.
10319	**Syphilis, late with clinical manifestations (including late benign syphilis and cardiovascular syphilis)***	Added to the NNDL in 2014. This is a newly assigned event code, as of January 2014.		All reports are printed
10311	**Syphilis, primary***	Extended record format available for STD line-listed data transmitted through NETSS.		All reports are printed.
10312	**Syphilis, secondary***	Extended record format available for STD line-listed data transmitted through NETSS.		All reports are printed.
10310	**Syphilis, total primary and secondary***	Used by states not using line-listed STD reporting through NETSS, but instead used for transmitting summary data through NETSS.		All reports are printed.
10315	Syphilis, unknown latent	The Syphilis, unknown latent 10315 code retired, as of January 1, 2014.		All reports are printed.
10210	**Tetanus***	Extended record format available for NETSS transmission.		All reports are printed.

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10074	Tick-borne Encephalitis viruses	Assigned for Arboviral Disease Surveillance conducted through ArboNET, not NETSS or NEDSS		
10520	**Toxic shock syndrome (other than Streptococcal) (TSS)***	Case definition changed, 2011.		Confirmed and probable; unknown from CA
12020	Toxoplasmosis			
10270	**Trichinellosis***	Preferred name changed from trichinosis at CCID/NCEZID program request, October 2004. Terms are synonymous but trichinellosis will be encouraged as the preferred term. Case definition changed, 2014.		Confirmed and probable; unknown from CA
10220	**Tuberculosis***	Case definition changed, 2009.		Print criteria are determined by the CDC Tuberculosis program.
10230	**Tularemia***	Deleted from NNDL in 1995; Added to NNDL in 1999. CSTE recommends immediate (extremely urgent) notification for cases caused by suspected intentional release and standard notification for all cases other than those caused by suspected intentional releases.		Confirmed and probable; unknown from CA
10240	**Typhoid fever (caused by *Salmonella typhi*)***			Confirmed and probable; unknown from CA
10260	Typhus Fever, (endemic fleaborne, Murine)	Deleted from NNDL in 1988.		
11663	**Vancomycin-intermediate *Staphylococcus aureus* (VISA)***	Added to NNDL in 2004.		Confirmed; unknown from CA verified as confirmed
11645	Vancomycin-resistant *Enterococcus*			

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
11665	**Vancomycin-resistant *Staphylococcus aureus* (VRSA)***	Added to NNDL in 2004.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation with OID/OPHPR. Following these procedures, all cases meeting print criteria will be printed.	Confirmed; unknown from CA verified as confirmed
10030	**Varicella (Chickenpox)***	Added to NNDL in 2003.		Cases with confirmed, probable, and unknown case status from CA are printed.
10055	Venezuelan equine encephalitis virus neuroinvasive disease	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
10067	Venezuelan equine encephalitis virus non-neuroinvasive disease	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
11541	*Vibrio parahaemolyticus*	Retired code in 2007. Replaced by event code 11545 for Vibriosis (non-cholera *Vibrio* infections)		
11540	*Vibrio spp.*, non-toxigenic, other or unspecified	Retired code in 2007. Replaced by event code 11545 for Vibriosis (non-cholera *Vibrio* infections)		
11542	*Vibrio vulnificus*	Retired code in 2007. Replaced by event code 11545 for Vibriosis (non-cholera *Vibrio* infections)		

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
11545	**Vibriosis (any species of the family Vibrionaceae, other than toxigenic Vibrio cholerae O1 or O139)***	Added to NNDL in 2007. In 2007, event code 11545 replaces event codes 11540, 11541, and 11542. Case definition changed, 2012. In 2013 naming convention change per CSTE PS 11-ID-12 from Vibriosis* (non-cholera Vibrio species infections) to Vibriosis (any species of the family Vibrionaceae, other than toxigenic Vibrio cholerae O1 or O139)		Confirmed, probable, and unknown from CA
11647	**Viral hemorrhagic fevers***	Added to NNDL in 2010. Case definition changed, 2011. CSTE recommends immediate (extremely urgent) notification for suspected intentional cases and standard notification for cases other than those that are suspected intentional.	Before printing, cases should be verified by the Viral Special Pathogens Branch, CDC. CDC staff will verify all cases reported via consultation with the State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation by CDC. Following these procedures, all cases meeting print criteria will be printed.	Confirmed; footnote will denote the specific VHF (Ebola or Marburg, Lassa, new world Arenaviruses, Crimean-Congo, or Lujo virus) reported to CDC
10056	**West Nile virus neuroinvasive disease***	Added to NNDL in 2002. Formerly 'encephalitis/meningitis, West Nile'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. For West Nile fever, use code 10049. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10049	**West Nile virus non-neuroinvasive disease***	Formerly 'West Nile Fever'. Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET
10052	**Western equine encephalitis virus neuroinvasive disease***	Added to NNDL in 1995 (see Encephalitis, primary, 10050). Formerly 'encephalitis/meningitis, western equine'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET
10065	**Western equine encephalitis virus non-neuroinvasive disease***	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005. Case definition changed, 2011. Case definition changed, 2014		Data for publication received from ArboNET

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Code	Event	Notes+	Verification Procedures	Print Criteria †,**
10660	**Yellow fever***	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. CSTE recommends immediate (urgent) notification.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from *MMWR* publication pending confirmation by OID/NCEZID. Following these procedures, all cases meeting print criteria will be printed.	Data for publication received from ArboNET
11565	Yersiniosis			

† **Print policy for the National Notifiable Diseases Surveillance System**: For a case report of a nationally notifiable disease to print in the *Morbidity and Mortality Weekly Report* (*MMWR*), the reporting state or territory must have designated the disease reportable in their state or territory for the year corresponding to the data year of report to CDC. After this criterion is met, the disease-specific criteria listed in the table above are applied. When the above-listed table indicates that "all reports" will be earmarked for printing, this means that cases designated with "unknown" or "suspect" case confirmation status will print just as "probable" and "confirmed" cases will print.

** An unknown case classification status is used when a reporting jurisdiction sends aggregate counts of cases or when the surveillance information system of a reporting jurisdiction does not capture case classification data. However, in both situations, cases are verified to meet the case classification (e.g., confirmed, probable, suspected) specified in the print criteria.

+ Since CSTE position statements are not generally finalized until July of each year, the NNDSS data for the newly added conditions are not available from all reporting jurisdictions until January of the year following the approval of the CSTE position statement. As such, the "Notes" section includes the first full calendar year that a condition was added (or deleted) from the list of nationally notifiable diseases.

Abbreviations and other notes:
CDC   Centers for Disease Control and Prevention
NNDSS   National Notifiable Diseases Surveillance System
NNDL   National Notifiable Disease List
OID   Office of Infectious Diseases
CSTE   Council of State and Territorial Epidemiologists
MMWR   *Morbidity and Mortality Weekly Report*

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NCIRD   National Center for Immunization and Respiratory Diseases, CDC
OPHPR   Office of Public Health Preparedness and Response
NCEZID   National Center for Emerging and Zoonotic, Infectious Diseases
NEDSS   National Electronic Disease Surveillance System
NETSS   National Electronic Telecommunications System for Surveillance
STD   Sexually Transmitted Diseases

For purposes of this document, "line-listed" data are meant to mean "case-specific" data.

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