The report includes **NJDOH-approved confirmed** cases for the following diseases.

- AMOEBIASIS
- BOTULISM – FOODBORNE
- BOTULISM – INFANT
- BOTULISM - OTHER, UNSPECIFIED
- BOTULISM - WOUND
- CHOLERA - O1
- CHOLERA - O139
- EBOLA
- HANTAVIRUS PULMONARY SYNDROME
- HEPATITIS A
- HEPATITIS B – ACUTE
- HEPATITIS B – CHRONIC
- HEPATITIS B - PERINATAL
- HEPATITIS C – ACUTE
- HEPATITIS C – CHRONIC
- LASSA FEVER
- LEGIONELLOSIS
- LEPROSY (HANSEN DISEASE)
- LISTERIOSIS
- MALARIA
- MEASLES
- MARBURG
- POLIOMYELITIS
- RABIES
- RUBELLA - NON-CONGENITAL
- STREPTOCOCCUS AGALACTIAE (GBS)
- STREPTOCOCCUS PNEUMONIAE
- STREPTOCOCCUS PYOGENES (GAS) - WITHOUT TOXIC SHOCK SYNDROME
- TETANUS
- TRICHINOSIS
- VANCOMYCIN-INTERMEDIATE STAPHYLOCOCCUS AUREUS (VISA)
- VANCOMYCIN-RESISTANT STAPHYLOCOCCUS AUREUS (VRSA)
- VIRAL HEMORRHAGIC FEVERS OTHER (NOT MARBURG, EBOLA, LASSA)
- YERSINIOSIS

This report includes both **NJDOH-approved confirmed AND probable** cases for the following diseases.

- ANTHRAX
- ANTHRAX - CUTANEOUS
- ANTHRAX - INHALATION
- ANTHRAX - INTESTINAL
- ANTHRAX - OROPHARYNGEAL
- BABESIOSIS
- BRUCELLOSIS
- CALIFORNIA ENCEPHALITIS(CE)
CAMPYLOBACTERIOSIS
CHIKUNGUNYA
CREUTZFELDT-JAKOB DISEASE
CREUTZFELDT-JAKOB DISEASE - FAMILIAL
CREUTZFELDT-JAKOB DISEASE - IATROGENIC
CREUTZFELDT-JAKOB DISEASE - NEW VARIANT
CREUTZFELDT-JAKOB DISEASE - SPORADIC
CREUTZFELDT-JAKOB DISEASE - UNKNOWN
CRYPTOSPORIDIOSIS
CYCLOSPORIASIS
DENGUE FEVER - DENGUE
DENGUE FEVER - DENGUE-LIKE ILLNESS
DENGUE FEVER - SEVERE DENGUE
DIPHTHERIA
EASTERN EQUINE ENCEPHALITIS(EEE)
EHRLICHIOSIS/ANAPLASMOSIS - ANAPLASMA PHAGOCYTOPHILUM (PREVIOUSLY HGE)
EHRLICHIOSIS/ANAPLASMOSIS - EHRLICHIAS CHAFFEENSIS (PREVIOUSLY HME)
EHRLICHIOSIS/ANAPLASMOSIS - EHRLICHIAS EWINGII
EHRLICHIOSIS/ANAPLASMOSIS - UNDETERMINED
GIARDIASIS
HAEMOPHILUS INFLUENZAE
HEMOLYTIC UREMIC SYNDROME
JAMESTOWN CANYON VIRUS
LACROSSE ENCEPHALITIS(LSE)
LEPTOSPIROSIS
LYME DISEASE
MENINGOCOCCAL DISEASE (NEISSERIA MENINGITIDIS)
MUMPS
PERTUSSIS
POWASSAN
PSITTACOSIS
Q FEVER – ACUTE
Q FEVER – CHRONIC
ROCKY MOUNTAIN SPOTTED FEVER
RUBELLA - CONGENITAL
SALMONELLOSIS - NON TYPHOID
SARS
SHIGA TOXIN–PRODUCING E.COLI (STEC) - NON O157:H7
SHIGA TOXIN–PRODUCING E.COLI (STEC) - O157:H7
SHIGELLOSIS
SMALLPOX
ST LOUIS ENCEPHALITIS (SLE)
STREPTOCOCCUS PYOGENES (GAS) - WITH TOXIC SHOCK SYNDROME
TOXIC SHOCK SYNDROME – STAPHYLOCOCCAL
TULAREMIA
TYPHOID FEVER
VARICELLA
VIBRIO INFECTIONS (OTHER THAN V.CHOLERA SPP.)
WEST NILE VIRUS (WNV)
WESTERN EQUINE ENCEPHALITIS (WEE)
YELLOW FEVER
ZIKA VIRUS - DISEASE, CONGENITAL
ZIKA VIRUS - DISEASE, NON-CONGENITAL
ZIKA VIRUS - INFECTION, CONGENITAL
ZIKA VIRUS - INFECTION, NON-CONGENITAL

- This report includes **NJDOH-approved confirmed, probable AND possible** cases for the following diseases.

PLAGUE

- This report includes **NJDOH-approved confirmed** and **NJDOH-E-closed** cases for the following diseases.

INFLUENZA, HUMAN ISOLATES - NOVEL INFLUENZA A
INFLUENZA, HUMAN ISOLATES - TYPE 2009 H1N1
INFLUENZA, HUMAN ISOLATES - TYPE A (SUBTypING NOT DONE)
INFLUENZA, HUMAN ISOLATES - TYPE A H1
INFLUENZA, HUMAN ISOLATES - TYPE A H3
INFLUENZA, HUMAN ISOLATES - TYPE B

- Diseases listed above which are designated as nationally notifiable by the Centers for Disease Control are reported to CDC per MMWR print criteria. Some exceptions include:
  - DIPHTHERIA, HAEMOPHILUS INFLUENZAE, MUMPS, PERTUSSIS, ROCKY MOUNTAIN SPOTTED FEVER, RUBELLA – CONGENITAL, and VARICELLA should include confirmed, probable, and unknown cases for CDC reporting. However, New Jersey does not utilize “unknown” case status in disease reporting. New Jersey reports confirmed and probable cases only.
  - New Jersey reports confirmed MEASLES, RUBELLA - NON-CONGENITAL, and TETANUS cases only.
  - New Jersey reports confirmed, probable, and possible PLAGUE cases.

- CAMPYLOBACTERIOSIS – Beginning in January 2015, Campylobacteriosis was added to the nationally notifiable disease list.

- CREUTZFELDT-JAKOB DISEASE -- Cases are classified as confirmed or probable according to date of death. With Creutzfeldt-Jakob disease, date of death may be in the calendar year following identification of suspect cases. As such, the total number of cases in the CDRSS report is preliminary and may change when additional suspect cases are classified.

- CRYPTOSPORIDIOSIS – Confirmed and probable case classification will be distinguished from each other in the MMWR annual summary, not weekly tables.

- DENGUE VIRUS INFECTIONS – The case definition for DENGUE VIRUS INFECTIONS was changed in 2015 and implemented in NJ in 2016. DENGUE VIRUS INFECTIONS are classified as either DENGUE, DENGUE-LIKE ILLNESS, or SEVERE DENGUE. Prior to 2016, DENGUE VIRUS INFECTIONS were classified as
DENGUE FEVER, DENGUE HEMORRHAGIC FEVER, or DENGUE SHOCK SYNDROME.

- FOODBORNE INTOXICATIONS – CIGUATERA, FOODBORNE INTOXICATIONS - MUSHROOM POISONING, FOODBORNE INTOXICATIONS - PARALYTIC SHELLFISH POISONING, and FOODBORNE INTOXICATIONS - SCOMBROID

There are no formal case definitions for foodborne poisonings. These counts represent all reported cases of foodborne poisonings diagnosed by a healthcare provider and any clinically compatible epidemiologically linked to a diagnosed case.

- HEPATITIS A - The NJDOH case definition for a confirmed case of acute HEPATITIS A was revised as of 1/1/05. Thus, HEPATITIS A statistics cannot be compared to data prior to 2005.

- HEPATITIS B - PERINATAL— There are 175 perinatal hepatitis B cases that remain LHD open in CDRSS for MMWR Year 2016 due to follow-up needed on infants to ensure correct prophylaxis is administered over 24-month timeframe.

- INFLUENZA - There are no formal case definitions for influenza. NJDOH accepts any positive influenza test (i.e., rapid antigen, PCR, culture) as a confirmed report of influenza. Reports are received from commercial laboratories, acute care laboratories and the state public health laboratory. Reports received electronically from laboratories are entered into CDRSS as confirmed and E-closed. These counts represent only reported cases and do not represent all influenza positive influenza cases occurring in the state. Laboratories reporting Influenza, Human Isolates – Type A H1 are likely Influenza A 2009 H1N1 viruses but the tests conducted by the laboratories cannot subtype to that level.

- KAWASAKI DISEASE – No longer reportable in New Jersey.

- LYME – The case definition was changed in 2008 to report confirmed, probable and possible cases to NJDOH. Only confirmed cases were reported to NJDOH and CDC prior to 2008. Only confirmed and probable cases are currently reported to CDC.

- PERTUSSIS – One additional case from Atlantic County was reported after final CDC transmission was completed. In 2016, a total of 567 cases were reported in NJ.

- Q FEVER - ACUTE and Q FEVER - CHRONIC were added to the nationally notifiable disease list in 2008 to report confirmed and probable. Only Q FEVER, with no subcategory, was reported to NJDOH prior to 2008.

- SHIGA TOXIN–PRODUCING E.COLI (STEC) - NON O157:H7 and SHIGA TOXIN–PRODUCING E.COLI (STEC) - O157:H7 were reported to CDC as Confirmed and Probable only from 2011. All cases were reported to CDC prior to 2011.

- ZIKA - Due to the rapidly evolving epidemic of Zika virus infection, standardized case definitions for ZIKA were added to the Nationally Notifiable Diseases List in February 2016. The case definitions were updated in June 2016 and include four sub-groups: ZIKA VIRUS DISEASE, CONGENITAL; ZIKA VIRUS DISEASE, NON-CONGENITAL; ZIKA VIRUS INFECTION, CONGENITAL; and ZIKA VIRUS INFECTION, NON-CONGENITAL. Prior to 2016, cases were classified as ZIKA.
• Please consult the Communicable Disease Service at 609-826-5964 or http://nj.gov/health/cd/find.shtml for case definitions of reportable diseases listed in the report.

• Data source: New Jersey DOH’s CDRSS 2016 historical report (database created on May 1, 2017)

• This report is for public health use only. DATA WITH VALUES LESS THAN FIVE SHOULD NOT BE RELEASED TO THE PUBLIC WITHOUT ACCOMPANYING INTERPRETATION. Rates calculated from these numbers are statistically unreliable for interpretation.