# Reportable Condition Reporting Guidance

### Condition Name: Legionellosis

### **Condition Name in NBS:** Legionellosis

## **Reporting Timeframe:**Within One Working Day

#### TO REPORT:

- NBS users: Report conditions via Morbidity Report in NBS
- Non-NBS users: Report with this form

#### **Associated Reportable Laboratory Results**

Legionella species

#### **Condition Specific Reporting Details**

 Clinical Epidemiologic, Lab report, and Treatment information sections within the NBS Morbidity Report

#### **Additional Documentation to Include**

• If admitted to or visited a healthcare facility during the 14 days prior to symptom onset, please provide facility name and address. This includes long-term care, assisted living, clinics, hospitals, or rehabilitation facilities

#### For more information on Legionellosis please visit:

https://www.in.gov/health/idepd/diseases-and-conditions-resource-page/legionellosis/

For more information on reportable conditions: <a href="https://www.in.gov/health/idepd/communicable-disease-reporting/">https://www.in.gov/health/idepd/communicable-disease-reporting/</a>

