

# Reportable Condition Reporting Guidance



Indiana  
Department  
of  
Health

Infectious Disease  
Epidemiology &  
Prevention Division

## Condition Name:

**Typhoid fever, cases and carriers**

## Condition Name in NBS:

**Typhoid Fever (*S. enteritica typhi*)**

## 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

- *Salmonella enterica* serotype Typhi (Typhoid fever) detected by culture
- Antimicrobial susceptibility testing

## Condition Specific Reporting Details

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

## Additional Documentation to Include

- Applicable lab results
- Applicable patient medical records (if available)
- Any noted exposure history, including travel

## For more information on Typhoid Fever please visit:

<https://www.cdc.gov/typhoid-fever/about/index.html>

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



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