## Timeline

**Notifiable diseases and events**

### To be reported by

<table>
<thead>
<tr>
<th>Laboratory</th>
<th>Clinicians (clinical illness)</th>
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### Verbal report

**Public Health Region 2**  
**During business hours:** 506-658-5188  
**After business hours:** 506-658-2764

**AND**

**In writing by the end of the next working day**

**Public Health Region 2**  
**Public Health Services**  
**P.O. Box 93, Saint John, NB E2L 3X1**  
**Fax:** 506-643-7894

- Anthrax
- Botulism
- Cholera
- Clusters of illness thought to be food, water-borne or enteric
- Clusters of severe or atypical illness thought to be respiratory borne
- Diphtheria
- Hemorrhagic fever (viral)
- Influenza caused by a new subtype
- Malaria
- Meningococcal disease (invasive)
- Plague
- Poliomyelitis due to wild type poliovirus
- Severe acute respiratory syndrome
- Smallpox
- Unusual clusters of suspect notifiable disease cases
- Yellow fever

**Public Health Region 2**  
**During business hours:** 506-658-5188  
**After business hours:** 506-658-2764

**AND**

**In writing 24 hours**

**Public Health Region 2**  
**Public Health Services**  
**P.O. Box 93, Saint John, NB E2L 3X1**  
**Fax:** 506-643-7894

- Brucellosis
- Campylobacteriosis
- Cryptosporidiosis
- Cytosporidiosis
- Escherichia coli infection (Vero-toxigenic)
- Exposure to a suspected rabid animal
- Giardiasis
- Guillain-Barré syndrome
- Hantavirus pulmonary syndrome
- Haemophilus influenzae infection– all serotypes (invasive)
- Hepatitis A
- Hepatitis B
- Hepatitis E
- Legionellosis
- Listeriosis (invasive)
- Mumps
- Paralytic shellfish poisoning
- Pertussis
- Q fever
- Rabies
- Rubella (including congenital)
- Salmonellosis
- Shigellosis
- Staphylococcus aureus foodborne intoxications
- Streptococcus group A infection(invasive)
- Tuberculosis (active)
- Tuberculosis (active)
- Tularemia
- Tuberculosis (active)
- Typhoid

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**Fax:** 506-643-7894

**In writing within seven days**

- Unusual illness as per one of the following criteria:
  - presence of symptoms that do not fit any recognizable clinical picture
  - known aetiology but not expected to occur in New Brunswick
  - known aetiology that does not behave as expected
  - clusters presenting with unknown aetiology
- Varicella
- Vibrio species pathogenic to humans (other than Cholera)
- West Nile Virus infection
- Yersiniosis

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**In writing within seven days**

- Adverse reaction to a vaccine or other immunizing agent
- Chlamydial infection (genital)
- Clostridium difficile associated diarrhea
- Creutzfeldt-Jacob disease (Classic and New Variant)
- Cytomegalovirus (congenital/neonatal)
- Gonococcal infection
- Hepatitis C and G
- Hepatitis (other viral)
- Herpes (congenital/neonatal)
- Human Immunodeficiency Virus infection/Acquired Immunodeficiency Syndrome
- Influenza (laboratory confirmed)
- Leptospirosis
- Lyme borreliosis
- Malaria
- Methicillin-resistant Staphylococcus aureus
- Pneumococcal infection (invasive)
- Pneumococcal infection (invasive)
- Pertussis
- Rickettsial infection
- Streptococcus group B infection (neonatal)
- Syphilis (including congenital)
- Tetanus
- Toxoplasmosis
- Vancomycin-resistant Enterococcus