

Guideline for calling Public Health Units (after business hours) with Immediate Notifications
(last updated March 2025)

N.B the usual electronic notification procedure that laboratories undertake in notifying notifiable diseases is still required alongside / together with the process/es in this guideline.

Immediate notifiable conditions:

PH Regulation 2018, 32:

(2) The notice must be given by fax, email or other electronic means.

(3) Also, the notice must be given—

(a) if the condition is mentioned in schedule 2— immediately after the examination, pathological examination or receipt of the request; or

(b) otherwise—within 48 hours after the examination, pathological examination or receipt of the request.

Notifiable conditions (all listed in Schedule 2)	Email or fax notification only	Phone call required	
		Overnight between 2100 to 0830 (all days of the year)	Weekdays between 1700 to 2100 Weekends, public holidays between 0830 to 2100
acute flaccid paralysis (excluding polio and botulism – see poliomyelitis if polio is clinically suspected or botulism if botulism is clinically suspected)	Clinical diagnosis		
anthrax		Pathological diagnosis <i>or</i> Suspected Chemical, Biological, Radiological agent	Pathological diagnosis <i>or</i> Pathology request <i>or</i> Suspected Chemical, Biological, Radiological agent
Australian bat lyssavirus – potential exposure (i.e. bat bite, scratch or mucous membrane exposure)			Clinical Diagnosis
Australian bat lyssavirus – infection	Pathology request	Pathological diagnosis	Pathological diagnosis
avian influenza		Pathological diagnosis	Pathological diagnosis <i>or</i> Pathology request <i>or</i> Provisional diagnosis
botulism (food-borne)		Clinical diagnosis <i>or</i> Suspected Chemical, Biological, Radiological agent	Pathological diagnosis <i>or</i> Pathology request <i>or</i> Suspected Chemical, Biological, Radiological agent
botulism (intestinal - adult)		Clinical diagnosis	Pathological diagnosis <i>or</i> Pathology request
botulism (intestinal - infantile)		Clinical diagnosis	Pathological diagnosis <i>or</i> Pathology request
cholera			Pathological diagnosis
ciguatera poisoning			Clinical diagnosis

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		Overnight between 2100 to 0830 (all days of the year)	Weekdays between 1700 to 2100 Weekends, public holidays between 0830 to 2100
dengue	Serology results For Central Queensland PHU and all south of Rockhampton – Pathological diagnosis <i>or</i> Provisional diagnosis		For Mackay, Townsville, North West, Cairns and Hinterland and Torres and Cape HHSs – Pathological diagnosis (isolation of virus or detection by NAT or detection of NS1) <i>or</i> Provisional diagnosis
diphtheria (toxigenic) – wound swab (NB diphtheria other than toxigenic is notifiable, but NOT immediately notifiable)	Provisional diagnosis		Pathological diagnosis
diphtheria (toxigenic) – respiratory tract specimen, respiratory diphtheria (NB diphtheria other than toxigenic is notifiable, but NOT immediately notifiable)			Pathological diagnosis <i>or</i> Provisional diagnosis
food-borne or waterborne illness in 2 or more cases	Clinical diagnosis – all cases unless public health advice is required Note – clinicians should take faecal samples from patients with suspected FBI		
food-borne or waterborne illness in food handler	Clinical diagnosis – all cases unless public health advice is required Note – food handlers should not handle food while symptomatic with gastro symptoms		
haemolytic uraemic syndrome (HUS)			Pathological diagnosis <i>or</i> Clinical diagnosis
haemophilus influenzae type B infection (invasive)			Pathological diagnosis <i>or</i> Provisional diagnosis
Hendra virus infection		Pathological diagnosis	Pathological diagnosis <i>or</i> Pathology request
hepatitis A			Pathological diagnosis
Japanese encephalitis	Pathology request <i>or</i> Serology results	Serology results	Pathological diagnosis (isolation of virus or detection by NAT)
legionellosis	Pathological diagnosis		
measles			Pathological diagnosis <i>or</i> Provisional diagnosis

Notifiable conditions (all listed in Schedule 2)	Email or fax notification only	Phone call required	
		Overnight between 2100 to 0830 (all days of the year)	Weekdays between 1700 to 2100 Weekends, public holidays between 0830 to 2100
meningococcal disease (invasive)			Pathological diagnosis <i>or</i> Provisional diagnosis
mpox (MPX)	Pathology request <i>or</i> Pathological diagnosis		
Murray Valley encephalitis	Pathology request <i>or</i> Serology results		Pathological diagnosis (isolation of virus or detection by NAT)
paratyphoid			Pathological diagnosis
plague		Pathological diagnosis <i>or</i> Pathology request <i>or</i> Suspected Chemical, Biological, Radiological agent	Pathological diagnosis <i>or</i> Pathology request <i>or</i> Suspected Chemical, Biological, Radiological agent
poliomyelitis		Pathological diagnosis	Pathological diagnosis <i>or</i> Pathology request
rabies	Pathology request	Pathological diagnosis	Pathological diagnosis
severe acute respiratory syndrome (SARS)		Pathological diagnosis	Pathological diagnosis <i>or</i> Pathology request <i>or</i> Provisional diagnosis
smallpox		Pathological diagnosis <i>or</i> Pathology request <i>or</i> Provisional diagnosis <i>or</i> Suspected Chemical, Biological, Radiological agent	Pathological diagnosis <i>or</i> Pathology request <i>or</i> Provisional diagnosis <i>or</i> Suspected Chemical, Biological, Radiological agent
tularaemia	Pathology request	Suspected Chemical, Biological, Radiological agent	Pathological diagnosis <i>or</i> Suspected Chemical, Biological, Radiological agent
typhoid			Pathological diagnosis
viral haemorrhagic fevers (Crimean-Congo, Ebola, Lassa fever and Marburg viruses)		Pathological diagnosis <i>or</i> Pathology request <i>or</i> Provisional diagnosis	Pathological diagnosis <i>or</i> Pathology request <i>or</i> Provisional diagnosis
yellow fever	Pathology request <i>or</i> Serology results		Pathological diagnosis (isolation of virus or detection by NAT or detection of antigen in tissues by immunohistochemistry)

