

Attachment 21. PRA Burden Statement Screenshot

The screenshot shows the CDC website's "National Notifiable Diseases Surveillance System (NNDSS)" page. The breadcrumb trail is "CDC > NNDSS". The main heading is "Data Collection and Reporting". A sidebar on the left contains a navigation menu with items: Surveillance Case Definitions, History of Surveillance Case Definitions, Data and Statistics, HL7 Case Notification Information Systems/NEDSS, Data Collection and Reporting (selected), Integrated Surveillance Information Systems/NEDSS, NETSS, Other NNDSS Data Sources, Electronic Laboratory Reporting, Electronic Case Reporting, International Health Regulations, and History. The main content area includes a paragraph about CDC's collaboration with state and local health departments, a sub-heading "Notifiable Disease Surveillance Starts at State and Local Levels", and a paragraph explaining that CDC receives notifications from 57 reporting jurisdictions. A bullet point states: "It is mandatory that reportable disease cases be reported to state and territorial jurisdictions when identified by a health provider, hospital, or laboratory."

This screenshot is a zoomed-in view of the "Notifiable Disease Surveillance Starts at State and Local Levels" section. The left sidebar is partially visible, showing "Electronic Laboratory Reporting", "Electronic Case Reporting", "International Health Regulations", "History", "Downloads and Resources", "Key Terms", and "Contact Us". Below "History" are sections for "Search Conditions" (with a search box for "Condition Name" and a "Search All Conditions" button) and "Related Links" (including "NNDSS Modernization Initiative (NMI)", "NMI eShare", "CSTE Position Statements", and "PHIN Tools and Resources"). The main content area features a paragraph about CDC receiving notifications from 57 jurisdictions, followed by two bullet points: "It is mandatory that reportable disease cases be reported to state and territorial jurisdictions when identified by a health provider, hospital, or laboratory..." and "It is voluntary that notifiable disease cases be reported to CDC by state and territorial jurisdictions (without direct personal identifiers) for nationwide aggregation and monitoring of disease data...". A "Background" section follows, explaining that a notifiable disease is one for which regular, frequent, and timely information is necessary for prevention and control. A "Top of Page" link is visible at the bottom right of the content area.

Search All Conditions >

Related Links

- NNSSS Modernization Initiative (NMI)
- NMI eShare
- CSTE Position Statements
- PHIN Tools and Resources
- Morbidity and Mortality Weekly Report (MMWR)
- WONDER

Need Data?



Your SOURCE for Notifiable Disease Data
www.cdc.gov/ndss/data-and-statistics.html



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Background

A notifiable disease or condition is one for which regular, frequent, and timely information regarding individual cases is considered necessary for the prevention and control of the disease or condition. Data are collected through NNDSS, which is neither a single surveillance system nor a method of reporting. Rather, it is a "system of systems," which is coordinated by CDC at the national level across disease-specific programs to optimize data compilation, analysis, and dissemination of notifiable disease data. Monitoring surveillance data enables public health authorities to detect sudden changes in disease or condition occurrence and distribution, identify changes in agents and host factors, and detect changes in health-care practices. National-level surveillance data are compiled from case notification reports of national notifiable diseases and conditions submitted from the state, territory, and selected local health departments to CDC.

Cases are first identified through reports of diseases, conditions, and outbreaks from the local level to the state or territory. Legislation, regulation, or other rules in those jurisdictions require health-care providers, hospitals, laboratories, and others to provide information on reportable conditions to public health authorities or their agents. Case reporting at the local level protects the public's health by ensuring the proper identification and follow-up of cases. Public health workers ensure that persons who are already ill receive appropriate treatment; trace contacts who need vaccines, treatment, quarantine, or education; investigate and control outbreaks; eliminate environmental hazards; and close premises where disease transmission is believed to be ongoing.

Although disease and condition reporting is mandated at the state, territory, and local levels by legislation or regulation, state and territory notification to CDC is voluntary. All U.S. state health departments, five territorial health departments, and two local health departments (New York City and District of Columbia) voluntarily notify CDC about national notifiable diseases and conditions that are reportable in their jurisdictions; the data in the case notifications that CDC receives are collected by staff working on reportable disease and condition surveillance systems in local, state, and territorial health departments.

The list of national notifiable diseases, conditions, and outbreaks is revised periodically. Conditions are added to the list as emerging pathogens, environmental hazards, or conditions emerge as public health concerns. Conditions are deleted from the list when surveillance is not found to be useful. Public health officials at state and territorial health departments collaborate with CDC staff in determining which diseases, conditions, and outbreaks should be considered nationally notifiable. CSTE, with input from CDC, makes recommendations annually for additions and deletions to the list. Similar to local public health officials, CDC uses these data to monitor trends; develop, implement and maintain programs; allocate resources; and assess the effectiveness of prevention and control efforts. The list of diseases and conditions considered reportable in each jurisdiction varies over time and across jurisdictions. Current and historical national public health surveillance case definitions used for classifying and enumerating cases consistently at the national level across reporting jurisdictions are available at <https://www.cdc.gov/ndss/conditions>.

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jurisdictions. Current and historical national public health surveillance case definitions used for classifying and enumerating cases consistently at the national level across reporting jurisdictions are available at <https://www.cdc.gov/ndss/conditions>.

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The public reporting burden of this collection of information is estimated to average 20 minutes per response for states, cities, and territories that automate case notification, 2 hours for states that do not automate, and 20 minutes for territories and freely associated states that do not automate. This includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to all collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to - CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30329 ATTN: PRA (0920-0728).

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Office of Public Health Scientific Services (OPHSS)

Center for Surveillance, Epidemiology, and Laboratory Services (CSELS)

Division of Health Informatics and Surveillance (DHIS)


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