

Notifiable disease reporting form

Notification by medical practitioner – Notifiable Diseases Act 1981

Reporting a notifiable disease by a medical practitioner is a requirement under section 8 of the [Notifiable Diseases Act 1981](#). Go to the [Northern Territory \(NT\) Health website](#) to view the NT Schedule of Notifiable Diseases.

Please ensure that the case has been informed: 1) of their diagnosis 2) that this information is being provided to the NT Department of Health 3) that the Centre for Disease Control (NT Department of Health) may contact them for further information

Conditions/s you are notifying (tick):			☎ = urgent, please call
☐ Acute post streptococcal glomerulonephritis (APSGN) ☎	☐ Group A streptococcal infection (invasive)	☐ Non-tuberculosis mycobacterial disease	
☐ Adverse vaccine reaction	☐ Haemolytic uraemic syndrome (HUS) ☎	☐ Pertussis ☎	
☐ Anthrax ☎	☐ <i>Haemophilus influenza</i> – type b (invasive) ☎	☐ Plague ☎	
☐ Australian bat lyssavirus ☎	☐ Hendra virus infection ☎	☐ Poliovirus infection ☎	
☐ Avian influenza ☎	☐ Hepatitis B: newly acquired	☐ Rabies ☎	
☐ Botulism ☎	☐ Hepatitis C: newly acquired	☐ Rheumatic fever	
☐ Chancroid ☎	☐ Hepatitis not otherwise specified	☐ Rheumatic heart disease	
☐ Chickenpox	☐ HIV (AIDS)	☐ Rubella	
☐ Chikungunya virus infection ^a ☎	☐ HTLV1: Adult T cell leukaemia/lymphoma	☐ Scabies (crusted)	
☐ Cholera ☎	☐ HTLV1: Tropical spastic paraparesis	☐ Severe acute respiratory syndrome (SARS) ☎	
☐ Ciguatera fish poisoning ☎	☐ Japanese encephalitis ☎	☐ Smallpox ☎	
☐ Congenital rubella syndrome	☐ Kunjin virus infection ☎	☐ Syphilis	
☐ Congenital syphilis	☐ Leprosy	☐ Tetanus	
☐ COVID-19	☐ Lymphogranuloma venereum (LGV)	☐ Tuberculosis ☎	
☐ Creutzfeldt-Jakob disease	☐ Lyssavirus not otherwise specified ☎	☐ Tularaemia ☎	
☐ Dengue virus infection ^a ☎	☐ Malaria ☎	☐ Typhoid (including paratyphoid) ☎	
☐ Diphtheria ☎	☐ Measles ☎	☐ Typhus (all forms)	
☐ Donovanosis (granuloma inguinale)	☐ Meningococcal infection ☎	☐ Varicella infection unspecified	
☐ Food or waterborne disease (in 2 or more related cases) ☎	☐ Middle East respiratory syndrome (MERS) ☎	☐ <i>Vibrio</i> disease (invasive) ☎	
☐ Gastroenteritis (in an institution / food handler) ☎	☐ Mpox ☎	☐ Viral haemorrhagic fevers ☎	
☐ Gonococcal conjunctivitis ☎	☐ Mumps	☐ Yellow fever ☎	
☐ Gonococcal ophthalmia neonatorum ^b ☎	☐ Murray Valley encephalitis ☎	☐ Zoster (shingles)	

^a Urgently notify infection if suspected to have been acquired in the NT

^b Urgently notify infection if penicillin resistant isolate

Case details

First name*		Last name*	
Date of birth*	Age	Sex	HRN (if known)
Residential address		Postcode	
Telephone		Email	
Indigenous status	☐ Aboriginal ☐ Non-indigenous	☐ Torres Strait Islander ☐ Not stated/unknown	☐ Both Aboriginal & Torres Strait Islander
Country of birth	Interpreter required? ☐ No ☐ Yes (language):		
Works in high risk setting?	☐ No ☐ Other:	☐ Healthcare worker ☐ Child care worker ☐ Commercial food handler	
Recent travel interstate?	☐ No	☐ Yes (where/dates):	
Recent travel overseas?	☐ No	☐ Yes (where/dates):	

Disease details and results

How was the case found?	☐ Clinical presentation ☐ Contact tracing ☐ Screening ☐ Unknown
Onset date (if known)	Date of death (if applicable)
Hospitalised?	☐ No ☐ Yes (where/admission date):
Specimen collection	☐ No ☐ Yes, result pending ☐ Yes, result finalised
Collection date	Specimen type
Collection method	☐ Nucleic acid testing ☐ Culture ☐ Serology ☐ Antigen detection ☐ Microscopy ☐ Other
Laboratory:	
Clinical notes	

Vaccine-preventable diseases (if disease was vaccine preventable, provide details)

Vaccination date/s	Vaccine type (brand name)
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Referring doctor/clinic/hospital details

Name	Clinic/hospital
Address	Postcode
Email	Notification date

Notify to the local Centre for Disease Control:

Darwin T: 8922 8044 F: 8922 8310 cdcsurveillance.darwin@nt.gov.au	Alice Springs T: 8951 7540 F: 8951 7900 cdc.alicesprings@nt.gov.au	Katherine T: 8973 9049 F: 8973 9048 cdc.katherine@nt.gov.au	Tennant Creek T: 8962 4259 F: 8962 4420 cdc.barkly@nt.gov.au	Nhulunbuy T: 8987 0357 F: 8987 0500 cdcgove.doh@nt.gov.au
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Collection notice

The information you provide on this form is collected by NT Health for the purpose of providing a public health response that includes contact tracing and case management under the *Notifiable Diseases Act* and *Public and Environmental Health Act*. The personal information you provide will be managed in accordance with the Information Privacy Principles contained in the *Information Act 2002* and will only be stored, used and disclosed in a manner that accords with privacy law.

If you have concerns with regard to the privacy of your information or would like to know more about accessing or correcting your information, please contact the NT Health Information and Privacy Unit at infoprivacyhealth.ths@nt.gov.au or on 08 8999 2880