New Mexico Department of Health

This guidance is intended to be used by potential ELR Trading Partners of the New Mexico Department of Health (NMDOH).

Updated March 2025

Electronic Laboratory Reporting (nmhealth.org)

OUR VISION: A healthier New Mexico!

OUR MISSION: To ensure health equity, we work with our partners to promote health and well-being and improve health outcomes for all people in New Mexico.

New Mexico Department of Health (NMDOH) Electronic Laboratory Guidance

New Mexico reportable events guidance for Laboratories

The diseases or conditions reportable to the New Mexico Department of Health (NMDOH) by all clinical laboratories are provided in the June 15, 2016 "Notifiable Diseases or Conditions in New Mexico" NM Administrative Code (7.4.3.13). This laboratory guidance document provides additional details to the Notifiable Diseases or Conditions in New Mexico list regarding the reportable tests and results, specimen source, and specimen/isolate submission to the state public health laboratory (the NMDOH Scientific Laboratory Division). See the NMHIT.org website for guidance on ELR formatting and procedures.

Not all reportable events require laboratory reporting (e.g, drug overdose).

Version Control			
Version	**Author /Editor**	**Date**	**Changes**
1.0	*Amy Drake*	*9.27.24*	*N/A*
1.1	*Amy Drake/ Debra Rivera*	*3.10.25*	*Non-Emergent Reportable Diseases or Conditions:* 1. *Hepatitis B – Added/Replaced Information* 2. *Hepatitis C – Added/Replaced Information* 3. *Syphilis -*Change in reporting ** 4. *E. coli 0157: H7 infections-Added/Replaced Information* 5. *E. coli, shiga-toxin producing (STEC)- Added/Replaced Information* 6. *Clostridiodes difficile (formerly known as Clostridium difficile) – Specified information*

Emergent Reportable Diseases or Conditions	Laboratory Tests and Results to Report to New Mexico Department of Health via Electronic Laboratory Result[1]	Send Isolate or Specimen to NMDOH SLD[2]

New Mexico Department of Health (NMDOH) Electronic Laboratory Guidance

: Denotes an immediately reportable condition. Call 833-SWNURSE for suspected or confirmed cases.		
Detection in one or more specimens of etiological agents of disease or conditions not limited to those listed in this Table that are of urgent and/or potential public health significance	***Detection in one or more specimens of etiological agents of disease or conditions not limited to those listed in this Table that are of urgent public health significance. Call or fax the on-call line to report these events.***	***By Request***
Other suspected environmental-induced health conditions	***Detection in one or more specimens of environmental agents of a condition not limited to those listed in this Table that are of urgent public health significance.***	***By Request***
Anthrax (*Bacillus anthracis*)	Positive culture, immunohistochemistry, or serology. Animal specimen results must be faxed: we do not accept animal results via ELR.	Required
Avian or novel influenza	Positive viral culture or molecular test for any specimen.	Required
Bordetella species (including pertussis)	Positive by any method for any specimen (including IgM or IgG acute or paired serology, PCR or molecular detection, or culture) Include speciation if known.	Required (except for serology)
Clostridium botulinum or botulinum toxin: any type	Report positive by any method for any specimen. If laboratory testing requested, call immediately 24/7/365 to NMDOH at 833-SWNURSE. The on-call epidemiologist will facilitate appropriate testing through the Centers for Disease Control and Prevention, if indicated.	Required
Cholera (*vibrio cholerae*)	Positive by any method for any specimen (including culture, molecular, and cholera toxin test). Include speciation results if known.	Required
Diphtheria *(Corynebacterium diphtheriae* or *Corynebacterium ulcerans)*	Positive culture from any clinical specimen or histopathology.	Required
Haemophilus influenzae invasive infections	Positive by any method (including culture, molecular testing and immunohistochemistry) for any specimen from a normally sterile site (including intravascular [blood], cerebrospinal, pleural, peritoneal, pericardial, joint/synovial fluids, and tissue from an internal body site such as bone, lymph node, or brain).	Required
Measles (rubeola virus)	Positive by IgM, molecular test, or viral culture for any specimen.	

Middle East Respiratory Syndrome (MERS)	Positive by any method including molecular and serologic tests for any specimen.	
Meningococcal infections, invasive (*Neisseria meningitidis)*	Positive by any method (including culture, molecular testing and immunohistochemistry) for any specimen from a normally sterile site (including intravascular [blood], cerebrospinal, pleural, peritoneal, pericardial, joint/synovial fluids, and tissue from an internal body site such as bone, lymph node, or brain).	Required
Plague *(Yersinia pestis)*	Positive by any method for any specimen (including microscopic examination, biochemical tests, culture, or molecular methods). Animal specimen results must be faxed: we do not accept animal results via ELR.	Required
Poliovirus	Positive by viral culture or molecular method for any specimen.	
Rabies virus: human	Testing is available only by coordination with the New Mexico Department of Health and Centers for Disease Control and Prevention (CDC). Call 833-SWNURSE to arrange testing.	
Rubella (German measles)	Positive by IgM, molecular test, or viral culture for any specimen.	
Severe Acute Respiratory Syndrome (SARS)	Positive by any method for any specimen (including antibody testing and molecular methods).	Required
Smallpox (variola virus)	Positive by PCR, or isolation with PCR confirmation. Naturally occurring smallpox was eradicated worldwide by 1980; therefore, if smallpox disease is suspected and laboratory tests are requested, a call should be made emergently 24/7/365 to NMDOH to decide if diagnostic tests should be conducted at the Scientific Laboratory Division. Note: laboratory diagnostic testing for variola virus must occur at the New Mexico Department of Health Scientific Laboratory Division using CDC Laboratory Response Network (LRN)-approved PCR tests and protocols for variola virus. Initial positive results require confirmatory testing at CDC. Call NMDOH at 833-SWNURSE 24/7/365 to report or confirm suspect cases.	Required

	For severe smallpox vaccine reactions, contact NMDOH at 505.827.0006 to discuss the case including medical management of vaccinia virus vaccine adverse reactions and prevention of transmission to others.	
Tularemia (*Francisella tularensis)* 📞	Positive by any method including serology, culture, or molecular for any specimen. Animal specimen results must be faxed: we do not accept animal results via ELR.	Required
Typhoid fever *(Salmonella Typhi*) 📞	Positive by any method on any specimen (including culture, serology, and molecular). Include speciation results if known. Include susceptibilities in ELR if possible; if not, please send culture and fax susceptibility results	Required
Yellow Fever 📞	Positive by any method for any specimen (including IgM, quantitative IgG indicating a positive test result, isolation of virus, demonstration of specific viral antigen, positive molecular test, or virus- specific neutralizing antibodies).	

Non-Emergent Reportable Diseases or Conditions 📞 **: Denotes an immediately reportable condition. Call 833-SWNURSE for suspected or confirmed cases.**	**Laboratory Tests and Results to Report to New Mexico Department of Health via Electronic Laboratory Result[1]**	**Send Isolate or Specimen to NMDOH SLD[2]**
Detection in one or more specimens of etiological agents of disease or conditions not limited to those listed in this Table that are of urgent and/or potential public health significance 📞	***Detection in one or more specimens of etiological agents of disease or conditions not limited to those listed in this Table that are of urgent public health significance. Call or fax the on-call line to report these events.***	***By Request***
Other suspected environmental-induced health conditions 📞	***Detection in one or more specimens of environmental agents of a condition not limited to those listed in this Table that are of urgent public health significance.***	***By Request***
	Positive by any method for any specimen (including IgM, quantitative IgG indicating a positive test result, isolation of virus, demonstration of	

Arboviral disease, including, but not limited to: • Cache Valley virus • California encephalitis virus • Chikungunya Virus • Colorado tick fever virus • Eastern Equine Encephalitis • Flavivirus disease not specified below • Jamestown Canyon virus • Japanese encephalitis virus • Keystone virus • La Crosse virus • Powassan virus • Saint Louis Encephalitis • Spondweni virus • Venezuelan Equine Encephalitis (VEE) • West Nile Virus • Western Equine Encephalitis • Yellow Fever (see Emergent Reporting Reportable Diseases and Conditions Note: Zika Virus result specifications are listed under Zika Virus below.	specific viral antigen, positive molecular test, or virus- specific neutralizing antibodies). Animal specimen results must be faxed: we do not accept animal results via ELR.	
Arsenic	Any level in urine greater than 50 micrograms/liter.	
Brucellosis (*B. suis, B. melitensis, or B. abortus)*	Positive by any method for any specimen including bacterial isolation or serological tests. Animal specimen results must be faxed: we do not accept animal results via ELR.	
Mumps (paramyxovirus)	Positive by IgM, molecular test, or viral culture for any specimen.	
Lyme disease *(Borrelia burgdorferi)*	Positive serologic test results.	
Tick-borne Relapsing Fever (*Borrelia hermsii, B. parkerii, B. turicatae*)	Positive by any method including antibody tests, molecular tests, or culture for any specimen. Speciation results if available.	

Louse-borne Relapsing Fever *(Borrelia recurrentis)*	Positive by any method including antibody tests, molecular tests, or culture for any specimen. Speciation results if available.	
Hard Tick Relapsing Fever (*Borrelia miyamotoi)*	Positive by any method including antibody tests, molecular tests, or culture for any specimen. Speciation results if available.	
Carbon Monoxide Poisoning	All results greater than 5% carboxyhemoglobin in blood.	
Cadmium	Any level in Urine; >= 5 micrograms per Liter in Blood	
Campylobacter infections (Campylobacter)	Positive by any method for any specimen (including culture, EIA, and molecular tests). Include speciation results if known.	Required
Candida auris	Positive by any method from any clinical site, include antifungal susceptibility testing if available Positive and negative screening (colonization) results by any method	Required for clinical specimens
Carbapenem-resistant *Enterobacteralesi* (CRE)	Enterobacteriaceae from any clinical site that demonstrate resistance to any carbapenem (doripenem, ertapenem, imipenem, meropenem) *; any organism that demonstrates carbapenemase production (by any test method); any results of a carbapenemase screening swab (both positive and negative screening results); results to include species identification, antimicrobial susceptibility testing, and any molecular testing performed. *Note for bacteria with intrinsic imipenem non-susceptibility (Morganella, Proteus, Providencia spp) resistance to carbapenems other than imipenem is needed. Antimicrobial resistance results are required in properly formatted ELR for culture results (see appendix C of the ELR onboarding handbook). If it is not possible to trigger an ELR on a combination of organism and resistance results, send the ELR with the organism and fax the susceptibility results, attention HAI Team.	Required
Carbapenem-resistant *Pseudomonas aeruginosa* (CRPA)	Pseudomonas aeruginosa from any clinical site that demonstrate resistance to meropenem, imipenem or doripenem; any organisms that demonstrate carbapenemase production (by any test method); results to include species identification, antimicrobial susceptibility testing, and any molecular testing performed. Antimicrobial resistance results are required in properly formatted ELR for culture results (see appendix C of the ELR onboarding handbook). If it is not possible to trigger an ELR on a combination of organism and resistance results, send the ELR with the organism and fax the susceptibility results, attention HAI Team.	Required

Carbapenem-resistant *Acinetobacter baumannii* (CRAB)	Acinetobacter baumannii from any clinical site that demonstrate resistance to meropenem, doripenem or imipenem or carbapenemase production (by any test method); results to include species identification, antimicrobial susceptibility testing, and any molecular testing performed. Antimicrobial resistance results are required in properly formatted ELR for culture results (see appendix C of the ELR onboarding handbook). If it is not possible to trigger an ELR on a combination of organism and resistance results, send the ELR with the organism and fax the susceptibility results, attention HAI Team.	Required
Psittacosis *(Chlamydia psittaci)*	Positive or detected by culture, serology, or molecular for any specimen. Animal specimen results must be faxed: we do not accept animal results via ELR.	
Chlamydia *(Chlamydia trachomatis*)	Positive by any method including immunofluorescence, molecular testing or culture for any specimen (include source/s whether genital or non-genital); include serovars when available. Note: if *Chlamydia trachomatis* serovars L1, L2, or L3 are detected and there is clinical suspicion for Lymphogranuloma Venereum, please call the NMDOH STD Program at 505.476.3636.	
Chromium	Any level in Urine or Blood	
Clostridiodes difficile (formerly known as *Clostridium difficile*)	Positive by any test method including toxin and antigen tests by enzyme immunoassay (EIA), PCR test (reflex PCR, stand-alone PCR, panel testing PCR), tissue culture (isolated from culture, toxigenic stool culture, molecular tests for any specimen. Include lab testing method.	Required
Tetanus *(Clostridium tetani)*	Positive by culture for any specimen. Do not report serologic test results.	
Coccidiodomycosis (Valley Fever) (*Coccidioides immitis*)	Positive by any method for any specimen (including IgG or IgM antibodies, molecular, culture).	
Colorado Tick Fever (Colorado tick fever virus)	Positive by any method for any specimen (including molecular or serologic).	
COVID 19 - SARS-CoV-2	Positive results for SARS-CoV PCR (including rapid), Ag.	

	Do not send Ask-At-Order-Entry (AOE) results or serology.	
Q Fever *(Coxiella burnetii*)	Positive in any specimen for *Coxiella burnetiid* by serology, molecular, immunohistochemical methods (IHC), or detection by culture.	
Cryptosporidiosis (*Cryptosporidium* spp.)	Positive by any method including microscopic examination of stool specimens or molecular methods for any specimen.	
Cyclosporiasis *(Cyclospora* spp.)	Positive by any method including microscopic examination of stool specimens, or molecular methods for any specimen.	
Cysticercosis (*Taenia solium*)	Positive serologic tests; also report any CNS imaging (e.g., CT and/or MRI) via fax when available.	
Dengue (Dengue virus)	Positive by any method for any specimen (including IgM, quantitative IgG indicating a positive test result, isolation of virus, molecular methods, virus- specific neutralizing antibodies).	
E. coli 0157:H7 infections	Isolation of the bacteria, detection of toxins, or positive molecular tests for any specimen. Include speciation when available.	Required
E. coli , shiga-toxin producing (STEC)	Isolation of the bacteria, detection of toxins, or positive molecular tests for any specimen. Include speciation when available.	Required
Ethylene Glycol	Positive qualitative or quantitative testing: all results.	
Hansen's disease/Leprosy (*Mycobacterium leprae)*	Any positive result of diagnostic histopathology or Ziehl-Neelson method of acid-fast staining.	
Giardiasis *(Giardia intestinalis, Giardia lamblia, Giardiaduodenalis)*	Positive by any method including microscopic, immunoassays, and molecular testing for any specimen.	
Hantavirus pulmonary syndrome (hantaviruses including Sin Nombre hantavirus and all others)	Positive IgG, positive IgM, or any positive molecular tests. Please send refrigerated specimen to SLD to confirm diagnosis upon ERD approval. Call 505-383-9124/9122 for submission instructions if needed.	
Hepatitis A virus, acute	Immunoglobulin M (IgM) antibody to hepatitis A virus (anti-HAV) positive, Nucleic acid amplification test (NAAT); such as Polymerase Chain Reaction [PCR] or genotyping) for hepatitis A virus RNA positive. If possible, report Hepatis A, B and C in separate messages. Include reflexed (total bilirubin and ALT) results if possible. Do not report HAV total results.	

Hepatitis B virus, acute or chronic	Report results where any one of the following conditions are present: • HBsAg positive (Hep B Surface Antigen) • HBeAG positive (Hep B Envelope Antigen) • Anti-HBc positive (Hep B Core antibody) (IgG or IgM) • HBV PCR or NAT positive or negative (qualitative, quantitative or genotype) If any of the above results are positive, send every available result in the HBV algorithm, regardless of positivity If possible, report Hepatis A, B and C in separate messages. Include entire hepatitis panel and associated/reflexed alanine aminotransferase (ALT) if available. Report positive and negative hepatitis B surface antibody (anti-HBs) if there is another reactive HBV test result.	
Hepatitis C virus, acute and chronic	For all adult patients: • HCV antibody (anti-HCV) **positive** results, including signal-to-cutoff • Nucleic Acid Test (NAT) for HCV RNA **positive and negative** results (including qualitative, quantitative and genotype) Additionally, for patients **under age 4** at specimen collection date, report all HCV antibody (anti-HCV) **positive and negative.** If possible, report Hepatis A, B and C in separate messages. Include reflexed (total bilirubin and ALT results if possible.	
Hepatitis E virus, acute	Positive IgM and/or IgG antibody to hepatitis E (anti-HEV). Positive nucleic acid test (NAT) for hepatitis E RNA (HEV RNA), including qualitative, quantitative and genotype testing.	
Human Immunodeficiency Virus (HIV)	• All reactive/repeatedly reactive initial HIV-1/HIV-2 antigen/antibody immunoassay results	

	• All results (e.g. positive, negative, indeterminate) from all supplemental HIV immunoassays (HIV-1/HIV-2 antibody differentiation assay, HIV-1 Western blot, HIV-2 Western blot or HIV-1 immunofluorescent assay) • All HIV genotype test results, i.e. protease, reverse transcriptase, and integrase nucleotide sequences determined through genotypic resistance testing • All HIV nucleic acid (RNA or DNA) detection test results (qualitative and quantitative) • All CD4 lymphocyte tests (count and percent) • All positive HIV cultures • All tests to detect HIV proteins • Cryptococcosis: all positive culture and antigen detection results • Cytomegalovirus disease: all positive culture and antigen detection results • Histoplasmosis: all positive culture and antigen detection results • *Mycobacterium avium* complex or *Mycobacterium kansasii*, disseminated or extrapulmonary: all positive cultures • Mycobacterium, other species or unidentified species, disseminated or extrapulmonary: all positive cultures	
Influenza virus, detection of avian or novel influenza; influenza-associated pediatric death; laboratory-confirmed influenza hospitalization	Positive viral culture or molecular result for any specimen.	Required for avian or novel strains
Lead	All blood levels tested; include limit of detection in the NTE segment, if possible. Include specimen source (blood or finger-prick) in either the specimen type or use a LOINC that differentiates the two types of specimens.	
Legionnaires' disease *(Legionella* spp.)	Positive by any method for any specimen (including urinary antigen test, paired serology, antibody stains, molecular test, and culture).	

Leptospirosis *(Leptospira* spp.*)*	Positive by any method for any specimen (including microscopic tests, serological tests, and molecular).	
Listeriosis *(Listeria* spp.)	Positive by any method for any specimen (including culture and molecular). Include speciation results if known.	Required
Malaria (*Plasmodium* spp.)	Positive by any method (including microscopic, antigen detection, serology, and molecular).	
Mercury	In urine all levels greater than 3 micrograms/liter and in blood greater than 5 micrograms/liter.	
Methemoglobinemia (infant)	All levels greater than or equal to 3% of total hemoglobin.	
Mycobacterium tuberculosis complex including, but not limited to: • *M. tuberculosis* • *M. bovis* • *M. africanum* • *M. canettii* • *M. microti*	All tests by any method from any site including: • acid-fast bacilli (AFB)-positive respiratory and/or non-respiratory specimen indicating presence of acid-fast bacilli. • positive nucleic acid amplification test (NAAT), including PCR, MTD, GeneXpert, indicating detection of *Mycobacterium tuberculosis*, or DNA probe positive for *Mycobacterium tuberculosis* complex • any culture result from respiratory and/or non-respiratory sources • all anti-TB drug susceptibility results, by molecular or dilutional method, from a specimen or isolate, with confirmed presence of *Mycobacterium tuberculosis* complex • positive interferon-gamma release assay (IGRA) qualitative and quantitative test results including QuantiFERON® Plus, T-Spot.TB® test • any genotyping results Note: Tuberculosis active disease is to be reported within 24 hours and infection within 72 hours.	
Gonorrhea (*Neisseria gonorrhoeae*)	Positive by any method for any specimen (including gram stain, culture, and molecular testing). List specimen source/s whether genital or non-genital. Include antimicrobial susceptibility testing when available. If the result shows antibiotic resistance, send the organism via ELR and fax the entire result to the STD program at: (505) 476-3638	

Pesticide: all tested, but not limited to, including • 2,4-D • Acephate • Bacillus thuringiensis (Bt) • Bendiocarb • Bifenthrin • Boric Acid • Bromadiolone • Capsaicin • Captan • Carbaryl • Chlordane • Chlorpyrifos • Citronella (Oil of Citronella) • CopperSulfate • Cyfluthrin • d-Phenothrin • DDT • DEET • Deltamethrin • Diatomaceous Earth • Diazinon • Dicamba • Fipronil • Glyphosate • Hexaflumuron • Hydramethylnon • Hydroprene • Imidacloprid • Iron Phosphate • Lambda-cyhalothrin • Malathion • Methoprene • Methyl Bromide • MGK-264 • Naled • Naphthalene • Neem Oil • Paradichlorobenzene • Permethrin • Picaridin • Piperonyl Butoxide • Potassium Salts of Fatty Acids • Pyrethrins • Pyriproxyfen • Resmethrin • Spinosad • Sulfur • Sulfuryl Fluoride • Triclopyr • Zinc Phosphide • Zinc Sulfate	All levels tested including negative results.	
Rocky Mountain Spotted Fever (*Rickettsia rickettsia*)	Positive by any method for any specimen (including serology, molecular, immunohistochemistry (IHC), and culture). Include speciation results if known.	
Salmonellosis *(Salmonella* spp (other than *S.*Typhi))	Positive by any method on any specimen (including culture and molecular). Include speciation results if known.	Required

Shigellosis (Shigella spp.*)*	Positive by any method on any specimen (including culture and molecular). Include speciation and susceptibility results if known. Antimicrobial resistance results are required in properly formatted ELR for culture results (see appendix C of the ELR onboarding handbook). If this is not possible, set up the cultures to be sent and fax susceptibility results.	Required
Streptococcus pneumoniae, invasive disease	Positive by any method (including culture, molecular testing and immunohistochemistry) for any specimen from a normally sterile site (including intravascular [blood], cerebrospinal, pleural, peritoneal, pericardial, joint/synovial fluids, and tissue from an internal body site such as bone, lymph node, or brain).	Required
Streptococcus Group A, invasive disease (*Streptococcus pyogenes*)	Positive by any method (including culture, molecular testing and immunohistochemistry) for any specimen from a normally sterile site (including intravascular [blood], cerebrospinal, pleural, peritoneal, pericardial, joint/synovial fluids, and tissue from an internal body site such as bone, lymph node, or brain). For group A Streptococcus, in addition to specimens from a normally sterile site as listed above, also include results from wound and muscle sites.	Required
Streptococcus Group B, invasive disease (*Streptococcus agalactiae*)	Positive by any method (including culture, molecular testing and immunohistochemistry) for any specimen from a normally sterile site (including intravascular [blood], cerebrospinal, pleural, peritoneal, pericardial, joint/synovial fluids, and tissue from an internal body site such as bone, lymph node, or brain).	Required
Syphilis *(Treponema pallidum)*	All results by any method (including direct detection via microscopy, serologic tests, or molecular methods) for any specimen. Include results from your laboratory and any reference laboratory results.	
Trichinellosis *(Trichinella* spp.*)*	Antibody, biopsy or any positive result for *Trichinella*.	By request
Trisomy 13, 18, 21	Any abnormal karyotype results from any specimen (i.e., amniotic fluid, chorionic villus, products of conception) for children from birth though age 4.	
Uranium	In urine greater than 0.2 micrograms/liter or 0.2 micrograms/gram of creatinine.	
Varicella (Varicella-zoster virus)	Positive by IgM, molecular test, or viral culture for any specimen.	
Vibrio species (non-toxigenic)	Positive by any method for any specimen (including culture, molecular, and cholera toxin test). Include speciation results if known.	Required

Yersinia species (other than *Yersinia pestis*)	Positive by any method for any specimen (including culture and molecular). Include speciation results if known.	Required
Zika virus	Report positive results by any method for any specimen (including molecular tests and serologic tests). Submit specimens for positive tests directly to NMDOH who will work with CDC for further testing as indicated.	

Footnotes

1. This list does not include every reportable condition as there are some for which specific etiologic laboratory tests do not exist, but rather a clinical syndrome (such as necrotizing fasciitis or drug overdose) with select additional laboratory results, imaging studies and other tests are diagnostic. For purposes of completeness of the list of "Notifiable Diseases or Conditions in New Mexico" (7.4.3.13 New Mexico Administrative Code), the conditions that are reportable but not included on the list above in the table are:

- Acute illness or conditions of any type involving large numbers of persons in the same geographic area;
- Illnesses or conditions suspected to be caused by the intentional or accidental release of biologic or chemical agents (for which laboratory or clinical samples are required to be sent to the Scientific Laboratory Division)
- Suspected foodborne illness in 2 or more unrelated persons (for which laboratory or clinical samples are required to be sent to the Scientific Laboratory Division)
- Suspected waterborne illness or conditions in 2 or more unrelated persons (for which laboratory or clinical samples are required to be sent to the Scientific Laboratory Division)
- Other illnesses or conditions of public health significance
- Occupational illness and injury including asbestosis, coal worker's pneumoconiosis, hypersensitivity pneumonitis, mesothelioma, noise induced hearing loss, occupational asthma, occupational burn hospitalization, occupational injury death, occupational pesticide poisoning, occupational traumatic amputation, silicosis, and other illnesses or injuries related to occupational exposure; environmental exposures other than those listed above include other suspected environmentally-induced health conditions
- Reportable injuries include drug overdose, traumatic brain injuries, firearm injuries, and fracture due to fall among older adults
- Adverse vaccine reactions
- Birth defects other than the defects found in chromosome testing listed above for Trisomy 13, Trisomy 18, and Trisomy 21, all birth defects diagnosed by age 4 years including defects diagnosed during pregnancy and defects diagnosed on fetal deaths are reportable
- Genetic and congenital hearing screening, neonatal screening for congenital hearing loss (all results), newborn critical congenital heart defects screenings (all results), suspected or confirmed congenital hearing loss in one or both ears, and all conditions identified through statewide newborn genetic screening are reportable.
- All cancer reporting is done through the NMDOH designee, the New Mexico Tumor Registry.
- All human papillomavirus (HPV) reporting is done through the NMDOH designee, the New Mexico HPV Pap Registry.

2. It shall be the responsibility of the director of a medical laboratory to submit isolates/specimens of designated microorganisms for confirmation, typing and/or antibiotic sensitivity. All isolates/specimens shall be accompanied by the NMDOH SLD clinical request form available at: https://nmhealth.org/publication/view/form/1497/). The state public health laboratory (NMDOH SLD) provides additional details about submission at https://nmhealth.org/publication/view/general/1496/**.**