In California, health care providers who have diagnosed, or suspect the presence of, a sexually transmitted disease (STD) in their patient are legally required to report that information to the local health department. The Confidentiality Morbidity Report (CMR) was developed by the California Department of Public Health (CDPH) to facilitate the reporting of communicable diseases, including STDs. An alternative way to report an illness is to utilize the provider portal in the California Reportable Disease Information Exchange (CalREDIE). To find out the status of provider portal or any other options for reporting in your local health jurisdiction please contact your local health department. By reporting STDs promptly and completely, you help limit the spread of STDs in California.

1 California Code of Regulations: Title 17, Division 1, Chapter 4, Subchapter 1, Article 1.
2 For a complete list of legally required reportable STDs, please see the back of the CMR; and consult with your local health department for any local reporting requirements.

**STD Reporting Time Frames**

**Within 1 working day of identification:** Syphilis, including suspected cases (i.e., presumption of syphilis based on presentation of signs and symptoms regardless of whether results of the laboratory tests are known).

**Within 7 days of identification:** Gonorrhea, chlamydia including lymphogranuloma venerum (LGV), and chancroid. Reporting of STDs does not require patient consent and is not subject to the requirements of the Health Insurance Portability and Accountability Act (HIPAA). HIPAA allows disclosure of this information to public health authorities for the "purpose of ... public health surveillance, public health investigations, and public health interventions ..." 45 CFR §164.512(b)(1).

**How to Report STDs with the CMR**

- **STD Being Reported:** If reporting multiple STDs for a patient, complete a separate CMR for each STD.
- **Patient Information:** Provide all available information.
- **Date of First Specimen Collection:** Provide date of specimen collection for this diagnosis.
- **Health Care Provider:** Record name of diagnosing health care provider, facility where patient was seen, and individual completing CMR.
- **Gender of Sex Partner(s):** Indicate gender of patient’s sex partner(s) in the past 12 months.
- **Syphilis Stage, Neurosyphilis, and Test Results:** Indicate stage of syphilis diagnosed AND whether patient has neurosyphilis. Check all laboratory tests performed and their results.
- **Chlamydia or Gonorrhea:** Indicate source of positive specimen. Only check sites where patient tested positive.
- **Partner(s) Treated:** Indicate how treatment of patient’s sex partners was managed.
- **STD Treatment:** Indicate how patient was or will be treated. Include the drug(s) used, dosage, and treatment date.

**More Information**

- **Local Health Department Contact Info:** https://www.cdph.ca.gov/Programs/CCHLO/CDPH%20Document%20Library/LHD_CD_Contact_Info_ADA.pdf
- **Reportable Diseases and Conditions:** https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Reportable-Disease-and-Conditions.aspx
- **CDPH STD Control Branch:** std.ca.gov