**Category 2: Written or electronic notification within 7days of diagnosing a case. The case must be notified following laboratory confirmation**

**LEGIONELLOSIS**

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| **Disease epidemiology** | **Who must notify** | **Clinical case definition**  (Suspected case) | **Probable case definition** | **Confirmed case definition** |
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| Disease caused by bacteria from the genus *Legionella* commonly presents with a spectrum of illness ranging from asymptomatic, to severe pneumonia (Legionnaire’s Disease), often requiring hospitalisation. Acquired from inhalation of contaminated aerosols. | * Health care practitioner (nurse or doctor receiving the laboratory result) * Laboratory making the diagnosis | Any person with clinical/radiological evidence of pneumonia where the public health physician, in consultation with the physician and microbiologist, considers that Legionnaire’s disease as the most likely diagnosis. | Any person with clinical/radiological evidence of pneumonia with:  1) *Legionella pneumophila* non-serogroup 1 or other *Legionella* spp. specific antibody response (fourfold or greater rise in specific serum antibody titer). | Any person with clinical/radiological evidence of pneumonia and at least one of the following: 1) Isolation of *Legionella* spp. from a respiratory specimen or any normally sterile site  2) Detection of *Legionella pneumophila* serogroup 1 antigen in urine  3) Detection of *Legionella* spp. nucleic acid in a clinical specimen  4) *Legionella* pneumophila serogroup 1 specific antibody response (fourfold or greater rise in specific serum antibody titer). |