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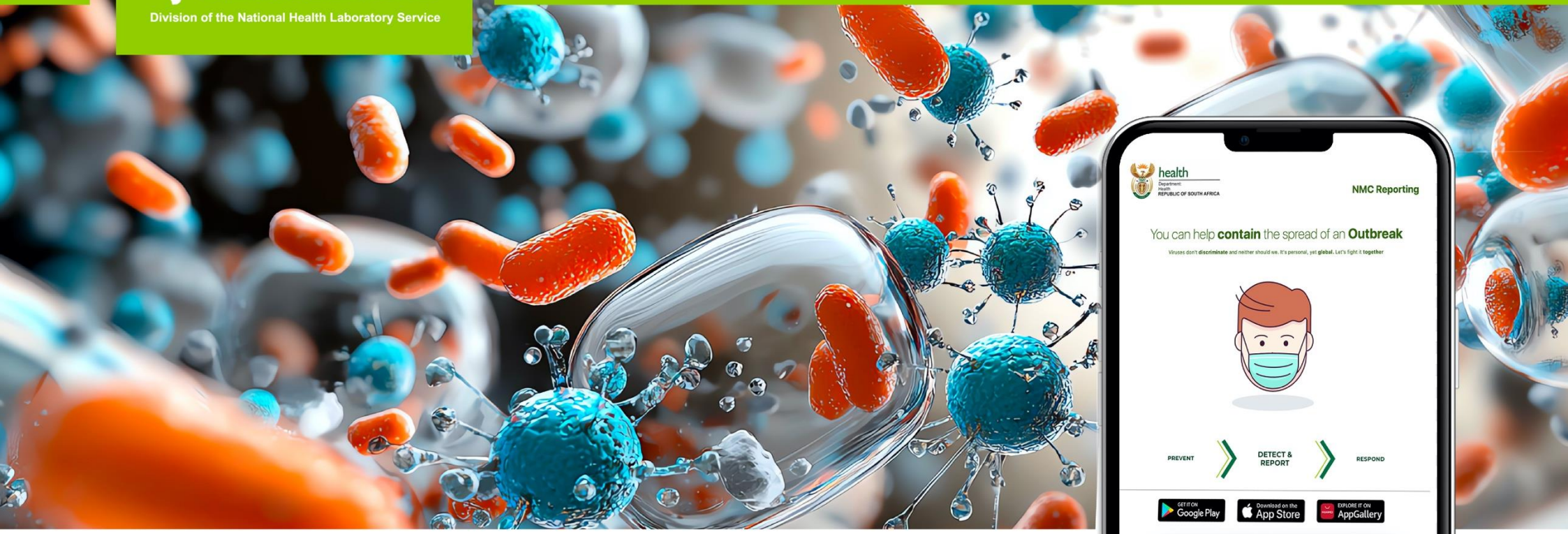

Notifiable Medical Conditions Surveillance System Report

July 2026

Division of Public Health, Surveillance and Response

Introduction

This report summarises data from the Notifiable Medical Conditions Surveillance System (NMCSS) for cases notified during July (**ISO Weeks 28–31**). It includes Category 1, 2, and 3 notifiable medical conditions (NMCs). The report presents the distribution of case notifications by source (clinical, laboratory, and merged cases; **Table 1**), epidemiological classification, demographics, and reported deaths. Additionally, it assesses key NMCSS data quality indicators, including the completeness and timeliness of notifications following diagnosis, as well as the number of delayed (back-captured) cases notified.

NMC highlights

- A total of 10 744 cases were notified to the NMCSS in July, of which 1 048 were back-captured (**Appendix A**).
- At least 16.8% (255/1 514) of category 1 notifications were successfully linked by matching clinical notifications to their corresponding laboratory results.
- There were two confirmed cholera cases; both patients are alive.
- In July, the agricultural or stock remedy poisoning case fatality rate (CFR) was 13.9% (14/101).
- Overall, Category 1 NMCs were reported within a median of less than a day (IQR: 0-1 days).
- NMCSS data completeness rates were above 90% for patient address and above 50% for national identification number.

Table 1. NMC notifications by category and case type, July 2026

Categories	Clinical	Laboratory	Merged	Total
1	864 (11.5%)	395 (22.8%)	255 (60.9%)	1 514 (15.6%)
2	6 679 (88.5%)	1 248 (72.0%)	158 (37.7%)	8 085 (83.4%)
3	0 (0.0%)	91 (5.2%)	6 (1.4%)	97 (1.0%)
Total, n(%)	**7 543 (77.8%)**	**1 734 (17.9%)**	**419 (4.3%)**	**9 696**

NMC Category 1 conditions

A total of 1 514 Category 1 cases were reported, accounting for 15.6% of all notifications (**Tables 1 and 2**). The majority were measles (n=913, 60.2%). The weekly measles and rubella situational reports and measles/rubella dashboards provide detailed epidemiological analysis. There were two confirmed cholera cases reported. Ten confirmed and five suspected cases of meningococcal disease were notified, with a case fatality rate of 20% (n= 3/15). Further epidemiological classification of diphtheria is underway, and the weekly situational report provides detailed epidemiological analysis. The majority of agricultural or stock remedy poisoning (ASRP) cases were reported in Gauteng (n=44; 43.6%), followed by the Free State (n=20; 19.8%) (**Table 2**). Furthermore, 13.9 % (n=14/101) of ASRP cases were reported as deceased (**Table 3**).

Table 2. Category 1 NMC notifications by province, July 2026

Condition	EC	FS	GP	KZN	LP	MP	NC	NW	WC	Total, n(%)
Acute Flaccid Paralysis	2 (11.1%)	1 (5.6%)	6 (33.3%)	0 (0.0%)	0 (0.0%)	2 (11.1%)	2 (11.1%)	1 (5.6%)	4 (22.2%)	18 (1.2%)
Agricultural or stock remedy poisoning	6 (5.9%)	20 (19.8%)	44 (43.6%)	2 (2.0%)	4 (4.0%)	9 (8.9%)	0 (0.0%)	9 (8.9%)	7 (6.9%)	101 (6.7%)
Cholera	0 (0.0%)	0 (0.0%)	2 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (0.1%)
Congenital rubella syndrome*	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (50.0%)	1 (50.0%)	0 (0.0%)	0 (0.0%)	2 (0.1%)
Diphtheria	0 (0.0%)	0 (0.0%)	1 (5.3%)	1 (5.3%)	7 (36.8%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	10 (52.6%)	19 (1.3%)
Enteric fever (typhoid or paratyphoid fever)	0 (0.0%)	0 (0.0%)	9 (47.4%)	2 (10.5%)	1 (5.3%)	5 (26.3%)	0 (0.0%)	0 (0.0%)	2 (10.5%)	19 (1.3%)
Foodborne illness outbreak	1 (4.8%)	0 (0.0%)	5 (23.8%)	4 (19.0%)	3 (14.3%)	5 (23.8%)	0 (0.0%)	2 (9.5%)	1 (4.8%)	21 (1.4%)
Listeriosis	1 (12.5%)	1 (12.5%)	1 (12.5%)	0 (0.0%)	0 (0.0%)	1 (12.5%)	0 (0.0%)	0 (0.0%)	4 (50.0%)	8 (0.5%)
Malaria**	5 (2.2%)	10 (4.5%)	46 (20.6%)	63 (28.3%)	21 (9.4%)	68 (30.5%)	1 (0.4%)	2 (0.9%)	7 (3.1%)	223 (14.7%)
Measles	46 (5.0%)	175 (19.2%)	91 (10.0%)	58 (6.4%)	65 (7.1%)	113 (12.4%)	66 (7.2%)	38 (4.2%)	261 (28.6%)	913 (60.3%)
Meningococcal Disease	1 (6.7%)	0 (0.0%)	2 (13.3%)	0 (0.0%)	0 (0.0%)	2 (13.3%)	0 (0.0%)	1 (6.7%)	9 (60.0%)	15 (1.0%)
Pertussis	5 (3.8%)	16 (12.3%)	57 (43.8%)	15 (11.5%)	6 (4.6%)	2 (1.5%)	0 (0.0%)	12 (9.2%)	17 (13.1%)	130 (8.6%)
Rabies	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (0.1%)
Rubella	1 (2.4%)	8 (19.5%)	8 (19.5%)	7 (17.1%)	3 (7.3%)	1 (2.4%)	5 (12.2%)	1 (2.4%)	7 (17.1%)	41 (2.7%)
Total, n (%)	**68 (4.5%)**	**231 (15.3%)**	**272 (18.0%)**	**154 (10.2%)**	**110 (7.3%)**	**209 (13.8%)**	**75 (5.0%)**	**66 (4.4%)**	**329 (21.7%)**	**1 514**

*The two cases of congenital rubella syndrome were linked to matching clinical notifications (merged cases). **Malaria diagnosis method: Rapid test (n= 126), and Laboratory confirmed (n=97).

Condition			Epidemiological classification				Patient vital status			
	Clinical notification	Laboratory notification	Confirmed case	Asymptomatic carrier	Probable case	Suspected case	Alive	Deceased (CFR)*	Unknown	Total, n (%)
Acute Flaccid Paralysis	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	18 (100.0%)	17 (94.4%)	1 (5.6%)	0 (0.0%)	18 (1.2%)
Agricultural or stock remedy poisoning	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	101 (100.0%)	79 (78.2%)	14 (13.9%)	8 (7.9%)	101 (6.7%)
Cholera	0 (0.0%)	0 (0.0%)	2 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (100.0%)	0 (0.0%)	0 (0.0%)	2 (0.1%)
Congenital rubella syndrome	0 (0.0%)	2 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (50.0%)	1 (50.0%)	0 (0.0%)	2 (0.1%)
Diphtheria	0 (0.0%)	0 (0.0%)	1 (5.3%)	3 (15.8%)	2 (10.5%)	13 (68.4%)	16 (84.2%)	1 (5.3%)	2 (10.5%)	19 (1.3%)
Enteric fever (typhoid or paratyphoid fever)	0 (0.0%)	0 (0.0%)	11 (57.9%)	0 (0.0%)	0 (0.0%)	8 (42.1%)	17 (89.5%)	0 (0.0%)	2 (10.5%)	19 (1.3%)
Foodborne illness outbreak	21 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	20 (95.2%)	1 (4.8%)	0 (0.0%)	21 (1.4%)
Listeriosis	0 (0.0%)	0 (0.0%)	6 (75.0%)	0 (0.0%)	0 (0.0%)	2 (25.0%)	4 (50.0%)	1 (12.5%)	3 (37.5%)	8 (0.5%)
Malaria	0 (0.0%)	0 (0.0%)	223 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	187 (83.9%)	1 (0.4%)	35 (15.7%)	223 (14.7%)
Measles	455 (49.8%)	315 (34.5%)	143 (15.7%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	576 (63.1%)	0 (0.0%)	337 (36.9%)	913 (60.3%)
Meningococcal Disease	0 (0.0%)	0 (0.0%)	10 (66.7%)	0 (0.0%)	0 (0.0%)	5 (33.3%)	11 (73.3%)	3 (20.0%)	1 (6.7%)	15 (1.0%)
Pertussis	0 (0.0%)	0 (0.0%)	79 (60.8%)	0 (0.0%)	5 (3.8%)	46 (35.4%)	111 (85.4%)	1 (0.8%)	18 (13.8%)	130 (8.6%)
Rabies	0 (0.0%)	0 (0.0%)	2 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (50.0%)	1 (50.0%)	0 (0.0%)	2 (0.1%)
Rubella	5 (12.2%)	36 (87.8%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	6 (14.6%)	0 (0.0%)	35 (85.4%)	41 (2.7%)
Total, n (%)	**481 (31.8%)**	**353 (23.3%)**	**477 (31.5%)**	**3 (0.2%)**	**7 (0.5%)**	**193 (12.7%)**	**1 048 (69.2%)**	**25 (1.7%)**	**441 (29.1%)**	**1 514**

*CFR: Case Fatality Rate

Distribution of Category 1 NMC notifications by age and sex

:The majority of the Category 1 NMC notifications were male (n=809/1 514, 53.4%) and individuals in the 0–4 age group (n=449, 29.7%; **Figures 1 and 2**). The male persons were mostly affected by measles (n=464/809, 57.4%) with a median age of 8 years, malaria (158/809, 19.5%) with a median age of 29 years, and ASRP (n=62/809, 7.7%). In contrast, the majority of pertussis cases were female (n=76/130, 58.5%).

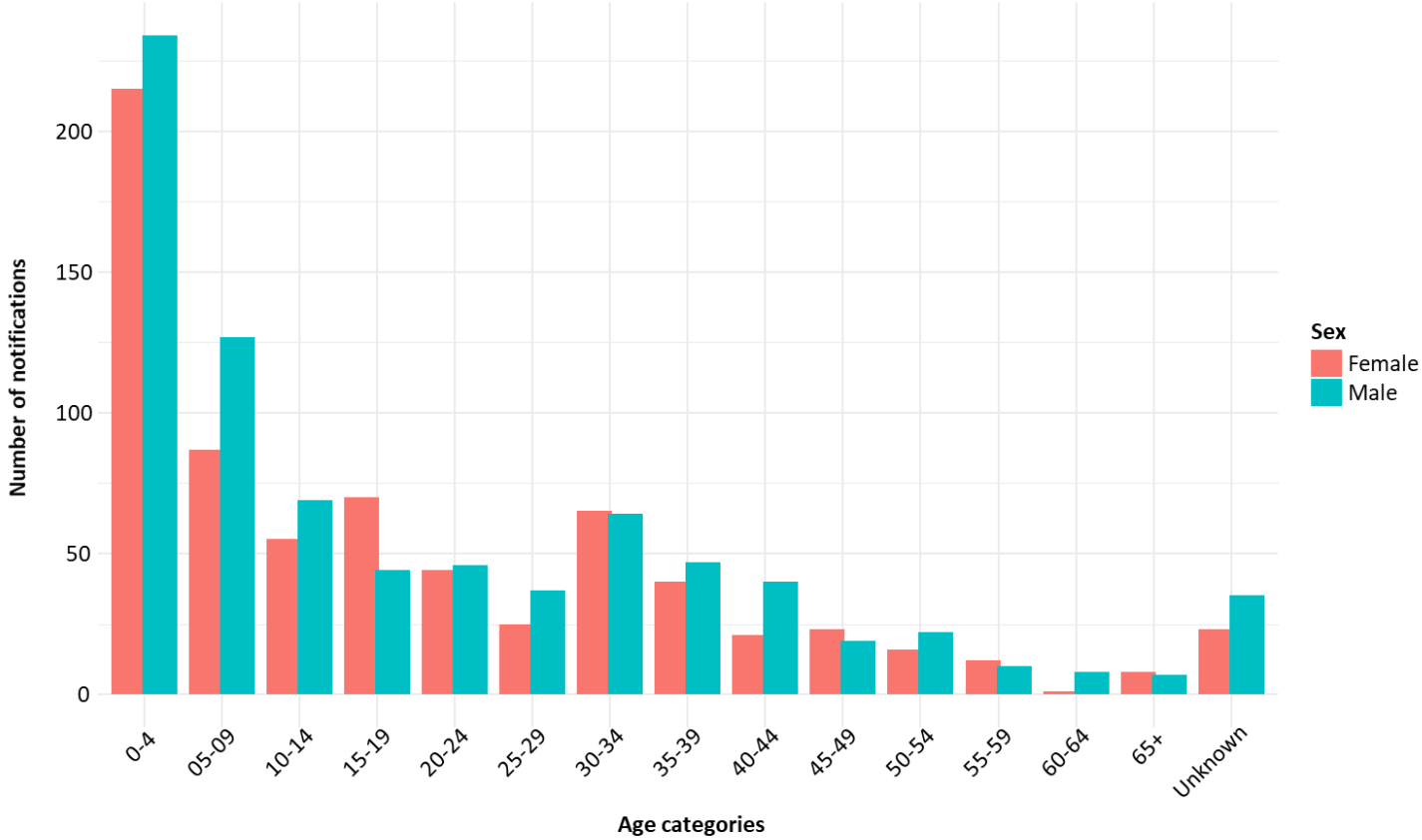

Figure 1. Distribution of Category 1 NMC notifications by age categories and sex, July 2026.

Category 1 NMC notifications in July 2026 showed clear age-specific patterns. Childhood conditions such as pertussis, congenital rubella syndrome and acute flaccid paralysis show a strong concentration among children, while conditions such as rabies, cholera and agricultural/stock remedy poisoning have a greater burden among adolescents and adults. Malaria, measles, meningococcal disease and enteric fever show more heterogeneous age distributions.

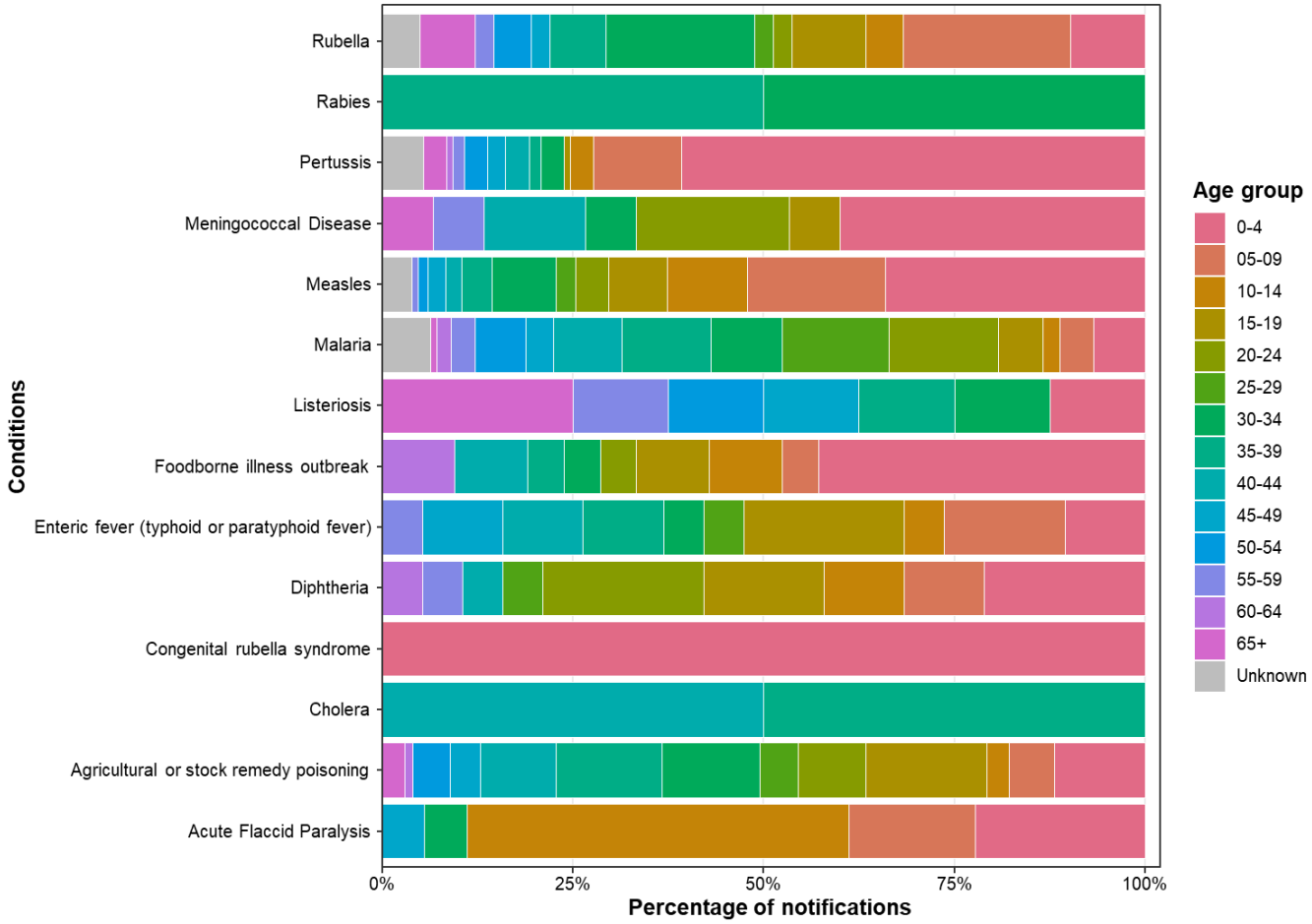

Figure 3. Category 1 NMC notifications by condition and age groups, July 2026

NMC Category 1 hospital form completion

At least 597 (39.4%) category 1 NMC cases had reported admission status of inpatients (n=447, 74.9%), discharged (n=120, 20.1%), or transferred out (n=30, 5.0%), making these cases eligible for completion of the hospitalisation form. Of these eligible cases (**Figure 3**), the hospitalisation form was incomplete (n=512, 85.8%) for the majority of cases.

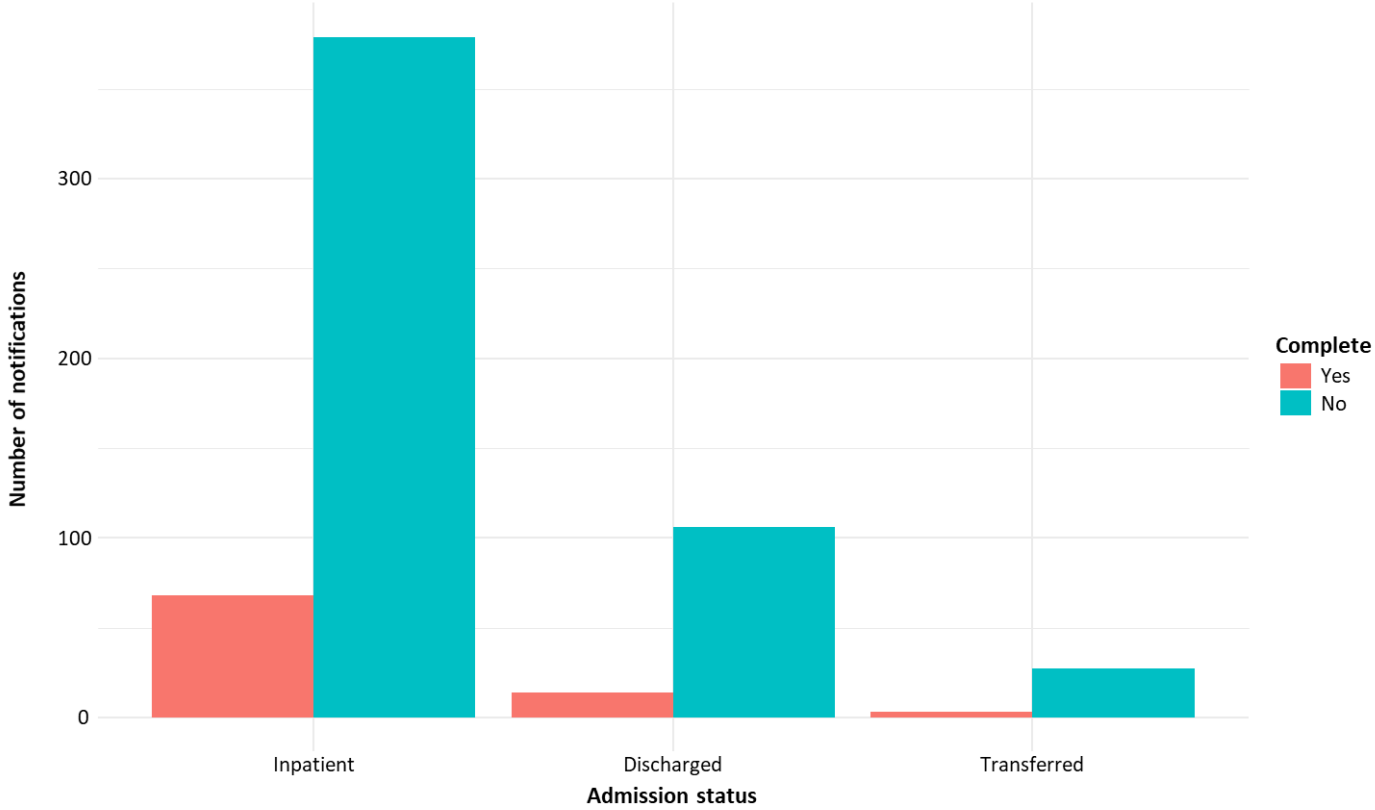

Figure 3. Completion of the hospitalisation form for Category 1 NMC notifications, July 2026

NMC Category 2 Notifications

The commonly notified category 2 conditions in July 2026 were pulmonary TB (n=5 274, 65.2%) and extra-pulmonary TB (n=1 047, 12.9%; **Table 4**). The End TB dashboard provides detailed epidemiology of TB in South Africa.

Table 4: Category 2 notifications by province, July 2026

Condition	EC	FS	GP	KZN	LP	MP	NC	NW	WC	Total
Bilharzia (schistosomiasis)	54 (5.6%)	0 (0.0%)	26 (1.6%)	357 (15.5%)	154 (30.1%)	100 (31.0%)	0 (0.0%)	0 (0.0%)	13 (1.2%)	704 (8.7%)
Brucellosis	0 (0.0%)	0 (0.0%)	1 (0.1%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (0.3%)	4 (0.0%)
Congenital syphilis	9 (0.9%)	2 (0.5%)	22 (1.4%)	36 (1.6%)	1 (0.2%)	0 (0.0%)	4 (1.1%)	4 (0.9%)	41 (3.7%)	119 (1.5%)
Haemophilus influenzae type B	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.2%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (0.3%)	4 (0.0%)
Hepatitis A	6 (0.6%)	13 (3.1%)	20 (1.2%)	13 (0.6%)	15 (2.9%)	3 (0.9%)	6 (1.6%)	10 (2.2%)	38 (3.4%)	124 (1.5%)
Hepatitis B	141 (14.6%)	17 (4.1%)	42 (2.6%)	389 (16.8%)	11 (2.2%)	7 (2.2%)	20 (5.4%)	13 (2.8%)	17 (1.5%)	657 (8.1%)
Hepatitis C	1 (0.1%)	2 (0.5%)	8 (0.5%)	4 (0.2%)	2 (0.4%)	0 (0.0%)	1 (0.3%)	0 (0.0%)	0 (0.0%)	18 (0.2%)
Hepatitis E	0 (0.0%)	0 (0.0%)	1 (0.1%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (0.2%)	3 (<0.1%)
Legionellosis	1 (0.1%)	0 (0.0%)	5 (0.3%)	1 (0.0%)	2 (0.4%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (0.3%)	12 (0.1%)
Maternal death (pregnancy, childbirth and puerperium)	1 (0.1%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.2%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (<0.1%)
Soil-transmitted helminths	2 (0.2%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (<0.1%)
Tetanus	1 (0.1%)	0 (0.0%)	0 (0.0%)	1 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.2%)	0 (0.0%)	3 (<0.1%)
Tuberculosis: extensively drug - resistant (XDR -TB)	1 (0.1%)	0 (0.0%)	0 (0.0%)	1 (0.0%)	0 (0.0%)	1 (0.3%)	0 (0.0%)	1 (0.2%)	3 (0.3%)	7 (0.1%)
Tuberculosis: multidrug- resistant (MDR -TB)	18 (1.9%)	4 (1.0%)	40 (2.5%)	20 (0.9%)	3 (0.6%)	1 (0.3%)	0 (0.0%)	1 (0.2%)	18 (1.6%)	105 (1.3%)
Tuberculosis: extra-pulmonary	91 (9.4%)	56 (13.5%)	380 (23.4%)	255 (11.0%)	44 (8.6%)	25 (7.7%)	32 (8.7%)	78 (17.0%)	86 (7.7%)	1 047 (12.9%)
Tuberculosis: pulmonary	637 (66.1%)	320 (77.3%)	1 080 (66.5%)	1 233 (53.4%)	277 (54.2%)	186 (57.6%)	306 (82.9%)	350 (76.4%)	885 (79.6%)	5 274 (65.2%)
Total, n (%)	**963 (11.9%)**	**414 (5.1%)**	**1 625 (20.1%)**	**2 310 (28.6%)**	**511 (6.3%)**	**323 (4.0%)**	**369 (4.6%)**	**458 (5.7%)**	**1 112 (13.8%)**	**8 085**

Distribution of Category 2 NMC notifications by age and sex

The majority of the category 2 NMC notifications were male (n=4 783, 59.2%) and individuals in the 30 to 49 age group (n= 3 426, 42.4%; **Figure 4**). The male persons were mostly affected by pulmonary tuberculosis.

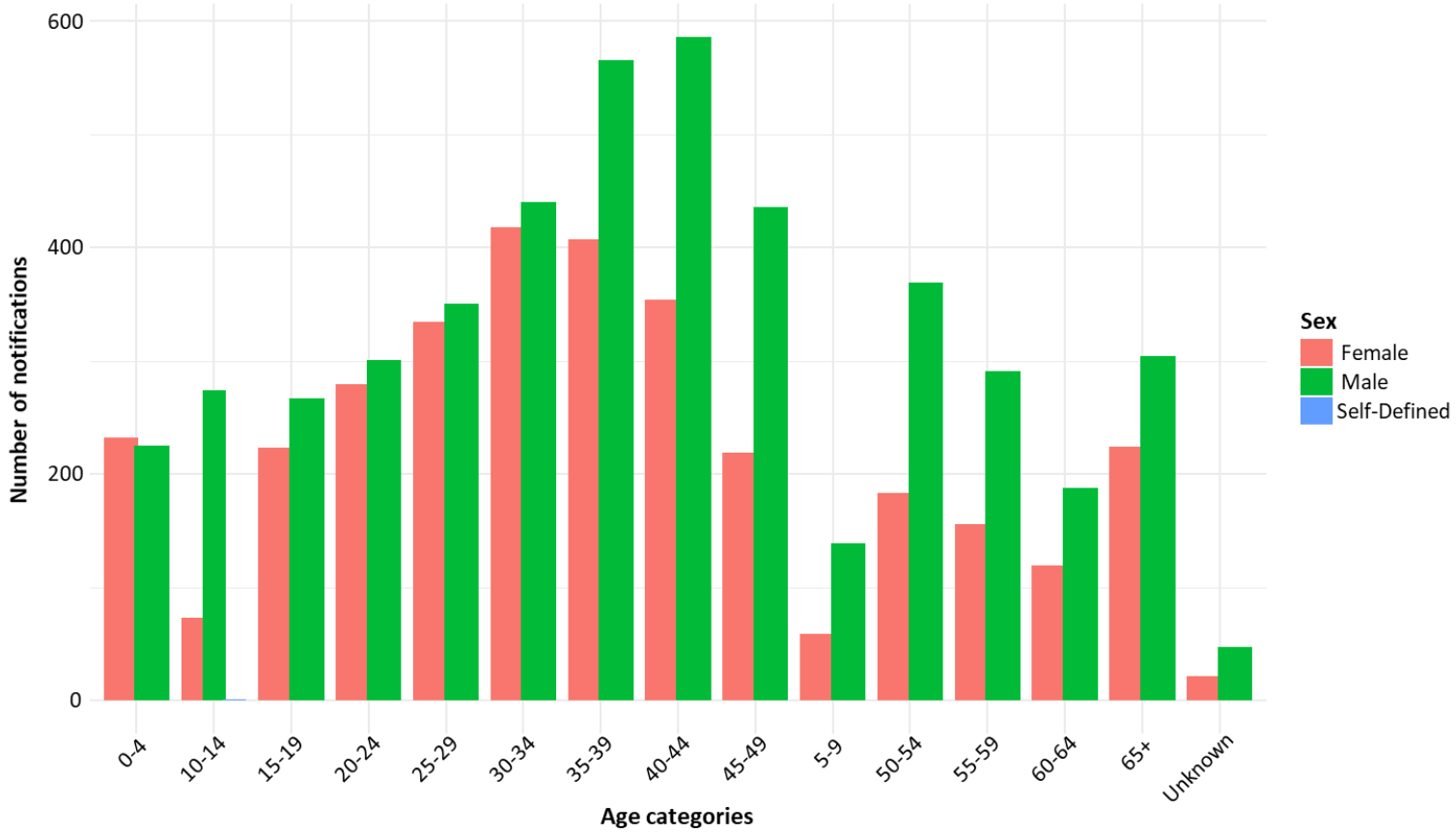

Figure 4. Distribution of NMC Category 2 notifications by age and sex, July 2026

NMC Category 3 conditions

Gauteng (n=1) and Western Cape (n=2) reported confirmed cases infected with the Dengue Fever Virus (**Table 5**). Western Cape Province notified confirmed cases of Chikungunya virus infection and West Nile virus infection.

Table 5: Distribution of category 3 NMC notifications by province, July 2026

Condition	EC	FS	GP	KZN	LP	MP	NC	NW	WC	Total, n(%)
Dengue Fever Virus	0 (0.0%)	0 (0.0%)	1 (12.5%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (3.4%)	3 (3.1%)
Chikungunya virus*	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (1.7%)	1 (1.0%)
West Nile Virus*	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (1.7%)	1 (1.0%)
Non-typhoidal Salmonellosis	6 (33.3%)	1 (50.0%)	2 (25.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	37 (63.8%)	46 (47.4%)
Shigellosis	12 (66.7%)	1 (50.0%)	5 (62.5%)	10 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (100.0%)	17 (29.3%)	46 (47.4%)
Total, n (%)	**18 (18.6%)**	**2 (2.1%)**	**8 (8.2%)**	**10 (10.3%)**	**0 (0.0%)**	**0 (0.0%)**	**0 (0.0%)**	**1 (1.0%)**	**58 (59.8%)**	**97**

***Endemic arboviral diseases

Timeliness and completeness of NMC data

Timeliness is measured as the number of days from the NMC diagnosis date to the notification date. This analysis excludes cases where the date of diagnosis was missing. Overall, it took a median of less than a day (IQR: 0- 1 days) to report category 1 NMCs in June 2026 across all provinces (**Table 6**).

Table 6: Time to notification of category 1 and 2 NMCs, July 2026

		EC	FS	GP	KZN	LP	MP	NC	NW	WC	Overall
Category 1	n	68	231	272	154	110	209	75	66	329	1 514
	Median (IQR*)	0 (0–0)	0 (0–0)	0 (0–1)	0 (0–0)	0 (0–0)	0 (0–0)	0 (0–0)	0 (0–2)	0 (0–0)	0 (0–0)
Category 2	n	963	414	1625	2310	511	323	369	458	1112	8 085
	Median (IQR*)	0 (0–4)	1 (0–6)	1 (0–6)	0 (0–3)	0 (0–2)	0 (0–3)	3 (0–9)	2 (0–6)	1 (0–6)	1 (0–5)

*IQR: Interquartile range

Completeness refers to the proportion of complete data entries per variable in the dataset among clinical and merged notifications. **Figure 5** reports a completion rate of more than 90% for patient address and above 50% for national identification number.

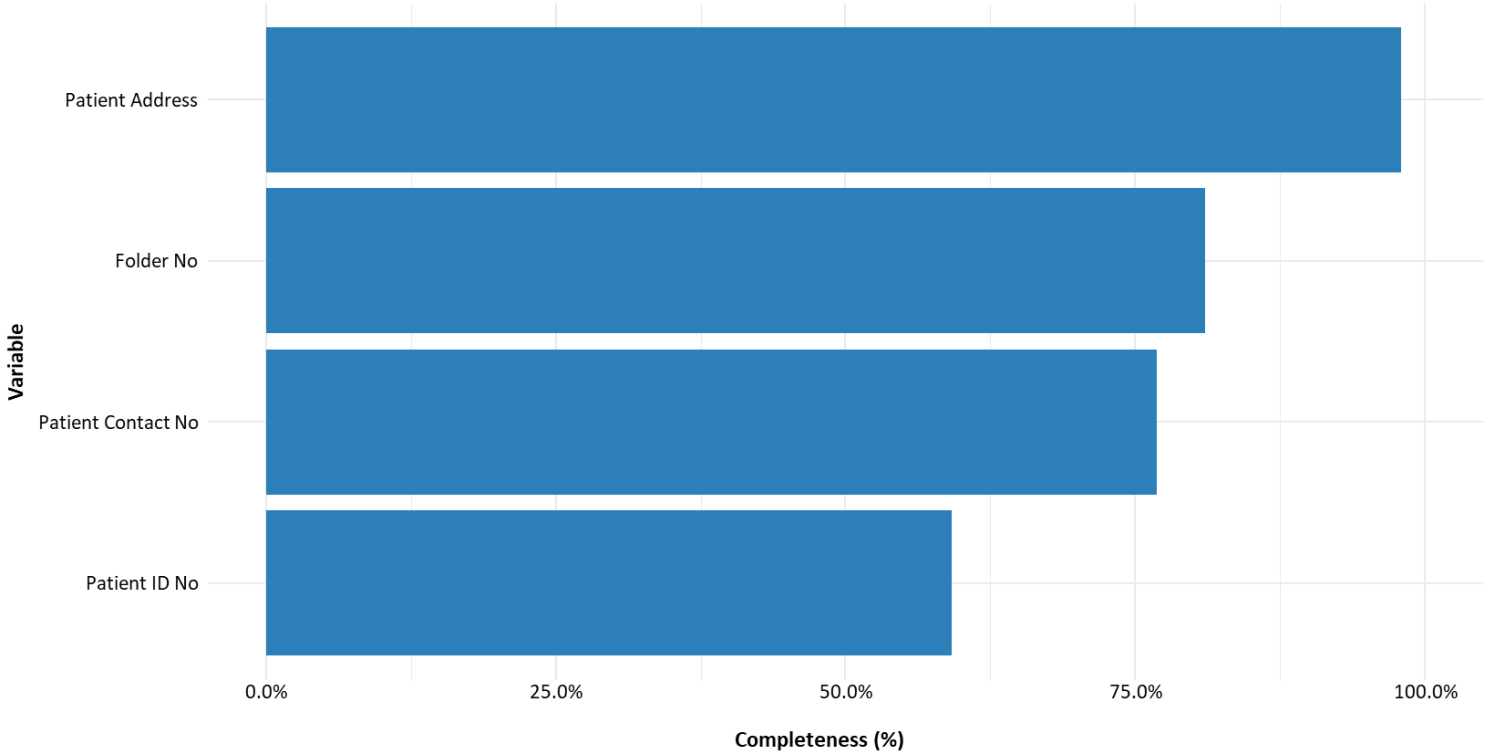

Figure 5. Data completeness of key patient identification variables, July 2026.

Recommendations

- We recommend that clinicians provide comprehensive patient clinical and demographic details to improve NMC data quality and inform epidemiological classification of notifications. The relatively low completeness of patient ID numbers may affect patient identification, record linkage and deduplication.
- We recommend completion of the hospitalisation form for all patients admitted to the hospital with category 1 NMCs.
- Feel free to reach out to NMCsurveillanceReport@nicd.ac.za

Appendix A: Back-captured notifications: all cases diagnosed in previous months and before ISO week 30 (in June 2026) and notified during July 2026.

Condition	EC	FS	GP	KZN	LP	MP	NC	NW	WC	Total
Acute Flaccid Paralysis	0 (0.0%)	0 (0.0%)	1 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.1%)
Agricultural or stock remedy poisoning	0 (0.0%)	0 (0.0%)	1 (50.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (50.0%)	2 (0.2%)
Bilharzia (schistosomiasis)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (50.0%)	1 (50.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (0.2%)
Congenital syphilis	6 (75.0%)	0 (0.0%)	0 (0.0%)	1 (12.5%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (12.5%)	8 (0.8%)
Hepatitis A	0 (0.0%)	0 (0.0%)	1 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.1%)
Hepatitis B	4 (14.3%)	1 (3.6%)	15 (53.6%)	7 (25.0%)	1 (3.6%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	28 (2.7%)
Hepatitis C	0 (0.0%)	0 (0.0%)	3 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (0.3%)
Malaria	0 (0.0%)	0 (0.0%)	1 (50.0%)	0 (0.0%)	1 (50.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (0.2%)
Maternal death (pregnancy, childbirth and puerperium)	1 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.1%)
Measles	0 (0.0%)	9 (75.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (8.3%)	1 (8.3%)	0 (0.0%)	1 (8.3%)	12 (1.1%)
Tuberculosis: extensively drug - resistant (XDR -TB)	0 (0.0%)	0 (0.0%)	2 (66.7%)	1 (33.3%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (0.3%)
Tuberculosis: multidrug- resistant (MDR -TB)	1 (3.3%)	0 (0.0%)	13 (43.3%)	8 (26.7%)	1 (3.3%)	0 (0.0%)	0 (0.0%)	1 (3.3%)	6 (20.0%)	30 (2.9%)
Tuberculosis: extrapulmonary	15 (8.9%)	14 (8.3%)	42 (25.0%)	54 (32.1%)	3 (1.8%)	4 (2.4%)	7 (4.2%)	17 (10.1%)	12 (7.1%)	168 (16.0%)
Tuberculosis: pulmonary	91 (11.6%)	93 (11.8%)	165 (21.0%)	184 (23.4%)	14 (1.8%)	20 (2.5%)	67 (8.5%)	68 (8.6%)	85 (10.8%)	787 (75.1%)
Total, n(%)	**118 (11.3%)**	**117 (11.2%)**	**244 (23.3%)**	**256 (24.4%)**	**21 (2.0%)**	**25 (2.4%)**	**75 (7.2%)**	**86 (8.2%)**	**106 (10.1%)**	**1 048**

Additional resources

NMC reporting tutorials video: https://www.nicd.ac.za/nmc-overview/tutorial-videos/

NMC Categories and Case Classification Definitions: https://www.nicd.ac.za/nmc-overview/nmc-resources/

NMC Surveillance Officers List and contacts

Province	Name & Surname	Email address	Cell Numbers
Eastern Cape	-	-	072 621 3805 (NMC Hotline)
Free State	Moeketsi Pheko	moeketsip@nicd.ac.za	060 978 3043/076 889 7319
Gauteng & Northwest	Bukelani Nyawose	bukelanin@nicd.ac.za	071 670 8741
KwaZulu-Natal	Sharika Naidoo	sharikan@nicd.ac.za	071 303 7392
Limpopo	Vuyolwethu Mashamaite	vuyolwethum@nicd.ac.za	060 963 4834
Mpumalanga	Lesley Ingle	lesleyI@nicd.ac.za	066 308 7539
Northern Cape	Matsheko Thekiso	matshekot@nicd.ac.za	060 984 0908
Western Cape	Washiefa Isaacs	washiefaI@nicd.ac.za	064 742 4005

The End!