TABLE 2o. Annual reported cases* of notifiable diseases, by region and reporting area, United States, U.S. Territories, and Non-U.S. Residents, 2022[†]

(Accessible Version: https://wonder.cdc.gov/nndss/static/2022/annual/2022-table2o.html)

Reporting Area	Salmonellosis (excluding *S.* Typhi infection and *S.* Paratyphi infection) [§]	Severe acute respiratory syndrome-associated coronavirus disease	Shiga toxin-producing *Escherichia coli* (STEC)	Shigellosis	Smallpox
U.S. Residents, excluding U.S. Territories	56,129	—	16,406	14,744	—
New England	2,173	—	411	477	—
Connecticut	454	—	147	119	—
Maine	150	—	17	11	—
Massachusetts	1,092	—	146	248	—
New Hampshire	213	—	27	25	—
Rhode Island	147	—	42	62	—
Vermont	117	—	32	12	—
Middle Atlantic	6,124	—	1,637	2,501	—
New Jersey	1,273	—	30	599	—
New York (excluding New York City)	1,927	—	561	400	—
New York City	1,293	—	673	1,206	—
Pennsylvania	1,631	N	373	296	—
East North Central	5,691	—	2,079	1,313	—
Illinois	1,683	—	493	487	—
Indiana	783	—	205	130	—
Michigan	851	—	404	217	—
Ohio	1,345	—	533	340	—
Wisconsin	1,029	—	444	139	—
West North Central	3,969	—	2,184	523	—
Iowa	728	—	501	106	—
Kansas	506	—	247	31	—
Minnesota	1,040	—	705	206	—
Missouri	920	—	309	97	—
Nebraska	403	—	276	56	—
North Dakota	122	—	58	10	—
South Dakota	250	—	88	17	—
South Atlantic	15,811	—	2,781	2,387	—
Delaware	214	—	26	30	—
District of Columbia	12	—	5	15	—
Florida	7,044	—	1,042	948	—
Georgia	2,264	—	380	443	—
Maryland	859	—	300	238	—
North Carolina	2,416	—	439	342	—
South Carolina	1,584	—	109	96	—
Virginia	1,198	—	391	253	—
West Virginia	220	—	89	22	—
East South Central	3,599	—	781	387	—
Alabama	997	—	161	81	—
Kentucky	622	—	160	83	—
Mississippi	1,023	—	99	76	—
Tennessee	957	—	361	147	—
West South Central	8,166	—	1,573	1,294	—
Arkansas	619	—	159	42	—
Louisiana	1,300	—	95	140	—
Oklahoma	761	—	265	48	—
Texas	5,486	—	1,054	1,064	—

TABLE 2o. Annual reported cases* of notifiable diseases, by region and reporting area, United States, U.S. Territories, and Non-U.S. Residents, 2022†

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Reporting Area	Salmonellosis (excluding *S.* Typhi infection and *S.* Paratyphi infection) §	Severe acute respiratory syndrome-associated coronavirus disease	Shiga toxin-producing *Escherichia coli* (STEC)	Shigellosis	Smallpox
Mountain	3,542	—	1,713	1,482	—
Arizona	1,173	—	303	604	—
Colorado	901	—	561	373	—
Idaho	273	—	248	46	—
Montana	165	—	118	15	—
Nevada	46	—	81	82	—
New Mexico	472	—	54	255	—
Utah	411	—	272	91	—
Wyoming	101	—	76	16	—
Pacific	7,054	—	3,247	4,380	—
Alaska	57	—	13	7	—
California	5,597	—	2,418	3,752	—
Hawaii	178	—	39	35	—
Oregon	483	—	271	193	—
Washington	739	—	506	393	—
U.S. Territories	459	—	7	21	—
American Samoa	—	—	—	—	—
Commonwealth of Northern Mariana Islands	—	—	—	—	—
Guam	22	—	—	11	—
Puerto Rico	432	—	7	10	—
U.S. Virgin Islands	5	—	—	—	—
Non-U.S. Residents	4	—	2	6	—
Total	56,592	—	16,415	14,771	—

—: No reported cases — The reporting jurisdiction did not submit any cases to CDC.
N: Not reportable — The disease or condition was not reportable by law, statute, or regulation in the reporting jurisdiction.
U: Unavailable — The data are unavailable.

* Cases are assigned to the reporting jurisdiction submitting the case to NNDSS if the case's country of usual residence is the United States, a U.S. territory, unknown, or country is not reported; otherwise, the case is assigned to the Non-U.S. Residents' category. Country of usual residence is currently not reported by all jurisdictions or for all conditions because this data element is only available in the HL7 generic version 2 and disease-specific message mapping guides. If a jurisdiction sends data in legacy formats, they are not able to send this information. For further information on interpretation of these data, see https://www.cdc.gov/nndss/data-statistics/readers-guides/.

† To calculate rates, use the populations provided in Table 8. Note that calculation of rates for the following conditions uses population subgroups as described in note #7 and population counts presented in Table 8: Zika virus infection, congenital; Zika virus disease, congenital; Infant botulism; Congenital rubella syndrome; Perinatal Hepatitis B infection; Perinatal Hepatitis C infection; *Haemophilus influenzae*, invasive disease; Invasive pneumococcal disease; and Influenza-associated pediatric mortality. Also see Notes #3 and #7.

§ Beginning in January 2019, cases began to be reported as salmonellosis (excluding *Salmonella* Typhi infection and *Salmonella* Paratyphi infection). In 2018, cases were reported as salmonellosis (excluding paratyphoid fever and typhoid fever). Prior to 2018, cases of paratyphoid fever were considered salmonellosis.

Notes:

1. These are **annual** cases of selected infectious national notifiable diseases from the National Notifiable Diseases Surveillance System (NNDSS). NNDSS data reported by the 50 states, New York City, the District of Columbia, and the U.S. territories are collated and published. Cases are reported by state health departments to CDC weekly. Because source datasets may be updated as additional information is received, statistics in publications based on that source data may differ from what is presented in these tables. Source datasets for the 2022 annual tables were officially closed on March 29, 2024.
2. The list of national notifiable Infectious diseases and conditions for 2022 and their national surveillance case definitions are available by navigating to the Surveillance Case Definitions | CDC web page, selecting "2022" for the notifiable condition list year, checking "Infectious" conditions, and clicking "Get Notifiable List by Year". Publication criteria for the finalized 2022 data are available at https://wonder.cdc.gov/nndss/documents/NNDSS_Publication_Criteria_2022.pdf. See also Guide to Interpreting Provisional and Finalized NNDSS Data.
3. Population estimates for incidence rates are July 1st, 2022 postcensal estimates of the resident population of the United States for July 1, 2020, to July 1, 2022, by year, county, single year of age (range: 0 to 85+ years), bridged-race (American Indian or Alaska Native, Asian or Pacific Islander, Black or African American, White), Hispanic ethnicity (Hispanic or Latino, not Hispanic or Latino), and sex (Female, Male), prepared under a collaborative arrangement with the U.S. Census Bureau and the National Cancer Institute (NCI). The "Vintage 2022" population estimates for years 2020-2022 were released March 2024 by the National Cancer Institute at https://seer.cancer.gov/popdata/. For more information, see https://seer.cancer.gov/popdata/singleages.html Population estimates for territories are the 2022 mid-year estimates from the U.S. Census Bureau International Data Base, accessed on May 02, 2024, at https://www.census.gov/data-tools/demo/idb/#/country?YR_ANIM=2022. The choice of population denominators for incidence is based on the availability of population data at the time of publication preparation.
4. Annual tables for 2016 and later years are available on CDC WONDER.

5. Annual summary reports from 1993–2015 are available as published in the *Morbidity and Mortality Weekly Report*.
6. NNDSS annual tables since 1952 are available at CDC Stacks. To find them, search for "NNDSS" under Collections. Once in NNDSS Collections, navigate to the "Genre" box on the left-hand side and select "Annual Reports".
7. For most conditions, national incidence rates are calculated as the number of reported cases for each infectious disease or condition divided by the U.S. resident population for the specified demographic population or the total U.S. resident population, multiplied by 100,000. When a national notifiable infectious condition is associated with a specific age restriction, the same restriction was applied to the population in the denominator of the incidence rate calculation. In addition, population data from reporting jurisdictions in which the disease or condition was not reportable or not available were excluded from the denominator of the incidence rate calculations.

   Age restrictions in the numerator and denominator are applied for the following childhood conditions:

   Zika virus disease, congenital (age restriction in numerator and denominator is <1 year)
   Zika virus infection, congenital (age restriction in numerator and denominator is <1 year)
   Haemophilus influenzae, invasive disease <5 years (age restriction in numerator and denominator is <5 years)
   Invasive pneumococcal disease <5 years (age restriction in numerator and denominator is <5 years)
   Influenza associated pediatric mortality (age restriction in numerator and denominator is <18 years)
   Infant botulism (age restriction in numerator and denominator is <1 year)
   Congenital rubella syndrome (age restriction in numerator and denominator is <1 year)
   Perinatal hepatitis B infection (age restriction is ≤24 months)
   Perinatal hepatitis C infection (age restriction is ≤36 months).

   Data for congenital syphilis are aggregated by the infant's year of birth. The rate for congenital syphilis is based upon the number of reported cases per 100,000 live births, using natality data for 2022 (National Center for Health Statistics Natality 2022, as compiled from data provided by the Vital Statistics Cooperative Program). Congenital syphilis cases are usually assigned to the mother's state of residence at the time of delivery. The mother's race and ethnicity are used for race- and ethnicity-specific rates of congenital syphilis cases.
8. Surveillance data reported by other CDC programs might vary from data reported in these tables because of differences in 1) the date used to aggregate the data, 2) the timing of reports, 3) the source of the data, 4) surveillance case definitions, and 5) policies regarding case jurisdiction (i.e., which jurisdiction should submit the case notification to CDC).
9. Disease data presented in the 2022 tables reflect impacts of the COVID-19 pandemic, such as changes in exposure-related behavior, healthcare-seeking behavior, disease reporting, and public health investigations.

Suggested Citation:

- Centers for Disease Control and Prevention. National Notifiable Diseases Surveillance System, 2022 Annual Tables of Infectious Disease Data. Atlanta, GA. CDC Office of Public Health Data, Surveillance, and Technology, 2024. Available at: https://www.cdc.gov/nndss/data-statistics/infectious-tables/index.html.

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