TABLE 2r. 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-table2r.html)

Reporting Area	Vancomycin-intermediate *Staphylococcus aureus*	Vancomycin-resistant *Staphylococcus aureus*[§]	Varicella morbidity	Varicella mortality	Vibriosis		
					Total	Confirmed	Probable
U.S. Residents, excluding U.S. Territories	82	2	4,348	3	3,038	1,474	1,564
New England	4	—	303	—	184	121	63
Connecticut	3	—	68	—	52	27	25
Maine	—	—	41	—	12	9	3
Massachusetts	1	—	101	N	101	72	29
New Hampshire	N	—	34	—	7	4	3
Rhode Island	—	—	42	—	12	9	3
Vermont	—	—	17	—	—	—	—
Middle Atlantic	16	—	444	—	463	166	297
New Jersey	3	—	204	—	114	44	70
New York (excluding New York City)	9	—	N	N	133	53	80
New York City	—	—	N	N	141	41	100
Pennsylvania	4	—	240	—	75	28	47
East North Central	11	—	1,021	—	254	94	160
Illinois	2	—	240	—	79	28	51
Indiana	N	—	157	—	24	16	8
Michigan	3	—	231	—	44	16	28
Ohio	4	—	231	N	58	15	43
Wisconsin	2	—	162	—	49	19	30
West North Central	32	1	409	—	157	45	112
Iowa	—	—	N	N	N	N	N
Kansas	—	1	102	—	15	—	15
Minnesota	—	—	204	—	91	20	71
Missouri	32	—	64	—	25	16	9
Nebraska	—	—	7	—	16	4	12
North Dakota	—	—	18	—	6	2	4
South Dakota	—	—	14	—	4	3	1
South Atlantic	3	—	1,021	—	779	435	344
Delaware	—	—	8	—	12	10	2
District of Columbia	N	N	10	—	7	1	6
Florida	—	—	428	—	321	233	88
Georgia	—	—	169	—	88	25	63
Maryland	—	—	N	—	109	42	67
North Carolina	1	—	98	—	84	37	47
South Carolina	—	—	155	—	38	25	13
Virginia	—	—	153	N	101	55	46
West Virginia	2	—	N	—	19	7	12
East South Central	9	—	123	—	144	61	83
Alabama	1	—	73	—	41	20	21
Kentucky	N	N	29	—	28	7	21
Mississippi	5	—	21	N	44	21	23
Tennessee	3	—	N	—	31	13	18
West South Central	7	1	547	2	338	155	183
Arkansas	—	—	51	N	14	6	8
Louisiana	2	1	48	1	99	46	53
Oklahoma	—	—	N	N	11	5	6
Texas	5	—	448	1	214	98	116
Mountain	—	—	414	1	201	99	102
Arizona	—	—	122	1	78	38	40

TABLE 2r. 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-table2r.html)

Reporting Area	Vancomycin-intermediate *Staphylococcus aureus*	Vancomycin-resistant *Staphylococcus aureus* §	Varicella morbidity	Varicella mortality	Vibriosis		
					Total	Confirmed	Probable
Colorado	—	—	139	N	74	35	39
Idaho	N	N	N	N	N	N	N
Montana	—	—	22	—	8	5	3
Nevada	—	—	3	—	9	6	3
New Mexico	N	N	40	N	4	2	2
Utah	—	—	85	—	21	9	12
Wyoming	—	—	3	N	7	4	3
Pacific	—	—	66	—	518	298	220
Alaska	N	—	32	—	7	4	3
California	N	N	19	—	331	175	156
Hawaii	—	—	15	—	43	41	2
Oregon	N	N	N	N	34	23	11
Washington	N	—	N	—	103	55	48
U.S. Territories	—	—	53	—	4	3	1
American Samoa	N	N	N	N	N	N	N
Commonwealth of Northern Mariana Islands	—	—	—	—	—	—	—
Guam	—	—	10	—	4	3	1
Puerto Rico	—	—	37	—	—	—	—
U.S. Virgin Islands	—	—	6	—	—	—	—
Non-U.S. Residents	—	—	—	—	—	—	—
Total	82	2	4,401	3	3,042	1,477	1,565

—: 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.

§ Vancomycin-resistant *Staphylococcus aureus* cases reported in this table may not have been verified by CDC. CDC verified 0 vancomycin-resistant *Staphylococcus aureus* cases in 2022.

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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