

Factsheet

Transition from the Queensland Notifiable Dust Lung Disease Register to the National Occupational Respiratory Disease Registry

23 September 2025

From 23 September 2025, notifiable occupational respiratory diseases that were previously reported to the **Queensland Notifiable Dust Lung Disease Register** must now be reported to the **National Occupational Respiratory Disease Registry**. Physicians must continue to report silicosis to the National Occupational Respiratory Disease Registry.

Changed notification requirements for Queensland physicians

The [Health Legislation Amendment Act \(No. 2\) 2025 \(Queensland\)](#) (the Act) received Royal Assent on 23 September 2025. The Act includes amendments to multiple pieces of health legislation, including the *Public Health Act 2005* and the *Public Health Regulation 2018*.

Under the amended *Public Health Act 2005*, all notifiable lung diseases that were previously reported to the Queensland Notifiable Dust Lung Disease Register must now be reported to the National Occupational Respiratory Disease Registry (National Registry).

The Queensland Notifiable Dust Lung Disease Register has been closed.

Silicosis must continue to be reported to the National Registry under the [National Occupational Respiratory Disease Registry Act 2023](#).

Who must notify

The following physicians (prescribed medical practitioners) in Queensland must notify all diagnoses of prescribed occupational respiratory diseases to the National Registry:

- occupational and environmental medicine physicians
- respiratory and sleep medicine physicians.

Only fully qualified specialist physicians are required to notify the National Registry.

What you must report

Prescribed medical practitioners in all states and territories must report diagnoses of silicosis made on or after 22 May 2024 to the National Registry.

From 23 September 2025, prescribed medical practitioners in **Queensland** must also report the following respiratory diseases (previously called notifiable occupational respiratory diseases in Queensland) to the National Registry where they are likely to have been caused by occupational exposure to inorganic dust:

- cancer (for example, mesothelioma)
- chronic obstructive pulmonary disease, including chronic bronchitis and emphysema
- pneumoconiosis, including:
 - asbestosis
 - coal workers' pneumoconiosis
 - mixed-dust pneumoconiosis
 - silicosis.

Prescribed medical practitioners in Queensland must report to the National Registry, even if they have reported the disease to Resources Safety and Health Queensland. Previous exemptions no longer apply.

Patient consent

Patient consent is not required to provide minimum notification information about a prescribed occupational respiratory disease to the National Registry. Minimum notification information includes:

- Details about the disease(s)
- Information that identifies the patient and their contact details
- Details on the occupational exposure that caused the disease(s)

Patient consent is required to provide additional notification information about a notifiable occupational respiratory disease to the National Registry. Additional notification information includes:

- Relevant medical test results
- Work history that has contributed to the disease
- The patient's height, weight, smoking history, and employment status

The National Registry also accepts notifications of non-prescribed occupational respiratory diseases, for which patient consent is required before these diseases can be reported to the National Registry.

Physicians of other states and territories

Prescribed occupational respiratory disease

For physicians practicing outside Queensland, reporting requirements have not changed. Silicosis remains the only prescribed occupational respiratory disease and mandatory to notify to the National Registry