

CENTERS FOR DISEASE CONTROL

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*Recommendations
and
Reports*

MORBIDITY AND MORTALITY WEEKLY REPORT

Case Definitions for Public Health Surveillance



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CENTERS FOR DISEASE CONTROL

syndromes do not have confirmatory laboratory tests, but laboratory evidence may be one component of a clinical definition; toxic shock syndrome is an example. Other diseases (e.g., mumps) have such a characteristic clinical presentation that, even in the absence of confirmatory laboratory testing, a diagnosis may be based only on clinical findings. In most instances, a brief clinical description is provided. Unless the clinical description is explicitly cited in the "Case classification" section of each definition, it is included only as background information.

Some diseases require laboratory confirmation for diagnosis, regardless of clinical symptomatology, and some are diagnosed on the basis of epidemiologic data. Many of the childhood vaccine-preventable diseases include epidemiologic criteria (e.g., exposure to probable or confirmed cases of disease) in the case definitions. In some instances, the site of infection may be important; pharyngeal diphtheria is notifiable, for example, whereas cutaneous diphtheria is not.

For many diseases, substantial amounts of information, including results of laboratory tests, must be collected before a final case classification is possible. State health departments are requested to continue reporting provisional cases to the NNDSS promptly, and records should be updated when additional surveillance information becomes available.

Surveillance demands uniformity, simplicity, and brevity. These case definitions are intended to establish uniform criteria for disease reporting; they should not be used as sole criteria for establishing clinical diagnoses, determining the standard of care necessary for a particular patient, setting guidelines for quality assurance, providing standards for reimbursement, or initiating public health actions. Use of additional clinical, epidemiologic, and laboratory data may enable a physician to diagnose a disease even though the surveillance case definition may not be met. For example, an adolescent with bilateral orchitis who attends a school in which a mumps outbreak is occurring would not meet the surveillance case definition for mumps unless the mumps virus was isolated. However, clinical judgment would suggest that in this situation, viral isolation is not necessary.

As knowledge increases and diagnostic technology improves, some definitions will change to reflect those trends. For example, many cases of non-A, non-B hepatitis are due to the recently described hepatitis C virus (4). Therefore, revisions, additions, and deletions can be expected in the future.

DEFINITION OF TERMS USED IN CASE CLASSIFICATION

Confirmed case: a case that is classified as confirmed for reporting purposes.

Probable case: a case that is classified as probable for reporting purposes.

Laboratory-confirmed case: a case that is confirmed by one or more of the laboratory methods listed in the case definition under "Laboratory criteria for diagnosis." Although other laboratory methods may be used in clinical diagnosis, only those listed are accepted for laboratory confirmation for reporting purposes.

Clinically compatible case: a clinical syndrome generally compatible with the disease, but no specific clinical criteria need to be met unless they are noted in the case classification.

Supportive laboratory results: specified laboratory results consistent with the diagnosis but not meeting the criteria for laboratory confirmation.

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