Date January 14, 2011

To: County Health Department Epidemiologists

From: Janet Hamilton, MPH; Surveillance and Reporting Section Administrator, Bureau of Epidemiology, Florida Department of Health

Subject: 2011 Summary of Changes to the Reportable Disease Case Definitions

A number of changes to the reportable disease case definitions have been identified as a result of position statements approved by the Council of State and Territorial Epidemiologists (CSTE) during 2010.

The document “Surveillance Case Definitions for Select Reportable Diseases in Florida, 2011” is posted on the Bureau of Epidemiology Internet site [http://www.doh.state.fl.us/disease_ctrl/epi/surv/CaseDefinitions.html](http://www.doh.state.fl.us/disease_ctrl/epi/surv/CaseDefinitions.html)

**Summary of case definition changes:**

1. Acute Arboviral Diseases: multiple revisions to case classification criteria;
2. Botulism: adds a probable case classification category to the wound botulism case definition and expands the confirmed case definition to include a history of injection drug use within the two weeks before onset of symptoms;
3. Campylobacteriosis: expands the probable case definition to include a positive stool EIA test;
4. CJD: includes re-formatting of the Laboratory Evidence section of the case definition; detection of tau protein is now included as criteria to meet the probable case definition;
5. Cryptosporidiosis: includes re-formatting of the Laboratory Evidence section of the case definition; detection of cryptosporidium antigen has been removed from the criteria to meet the confirmed case definition; antigen detection is used as criteria to meet probable case definition;
6. Giardiasis: includes a re-formatting and expansion of the Laboratory Evidence section of the case definition and revisions to the confirmed case definition; the laboratory evidence section now includes: DNA; the confirmed case definition requires a case to be clinically compatible in addition meeting the laboratory criteria; the 2010 confirmed case definition required laboratory evidence only;
7. Lyme Disease: includes a re-formatting and expansion of the Laboratory Evidence section of the case definition; the laboratory evidence section now includes: CSF antibody positive for *B. burgdorferi* by EIA or IFA, when the titer is higher than it was in serum;
8. Viral Hemorrhagic Fever: adds viruses included in the VHF surveillance case definition. VHF case definition includes: Ebola, Marburg, Arenavirus, Crimean-Congo Hemorrhagic Fever, Lassa, Lujo, and new world arenaviruses – Gunarito, Machupo, Junin, and Sabia). In addition, the clinical presentation criteria and the criteria for epidemiologic linkage in case definition have been revised.

Thank you very much for your surveillance and reporting efforts throughout the year. Your input is essential as we continue to work together to prevent and control these diseases.