### Clinical criteria for case classification

**Confirmatory:**
All of the following:
- Absence of a more likely diagnosis;
- And cough illness lasting ≥2 weeks;
- And one or more of the following:
  - Paroxysms of coughing,
  - Or inspiratory "whoop",
  - Or posttussive vomiting,
  - Or apnea, with or without cyanosis.

**Presumptive:**
Both of the following:
- Acute cough illness of any duration
- And one or more of the following:
  - Paroxysms of coughing,
  - Or inspiratory "whoop",
  - Or posttussive vomiting,
  - Or apnea, with or without cyanosis.

**Supportive:**
Acute cough illness of any duration.

### Laboratory criteria for case classification
Either of the following:
- Isolation of *Bordetella pertussis* by culture from clinical specimen.
- Positive polymerase chain reaction (PCR) for *B. pertussis*.

### Epidemiological criteria for case classification
A person who is epidemiologically linked to a confirmed pertussis case.

### Case classification

**Confirmed:**
A person with confirmatory, presumptive, or supportive clinical criteria and laboratory criteria.

**Probable:**
Either of the following:
- A person with confirmatory clinical criteria
- Or a person with presumptive clinical criteria and epidemiological criteria.

### Criteria to distinguish a new case from previous reports
Not applicable.
Comments
The clinical criteria above are appropriate for endemic or sporadic cases. In outbreak settings, a probable case may be defined as a cough illness lasting ≥2 weeks (as reported by a health professional). Because direct fluorescent antibody testing of nasopharyngeal secretions has been demonstrated in some studies to have low sensitivity and variable specificity,¹² such testing should not be relied on as a criterion for laboratory confirmation. Serologic testing (IgM and IgG) for pertussis is available in some areas but is not standardized and, therefore, should not be relied on as a criterion for laboratory confirmation.