

From CDC Smallpox Response Plan and Guidelines (Version 3.0), Guide A

SMALLPOX CASE DEFINITIONS AND CASE CLASSIFICATION

Preliminary case definitions are included below but may require revision by public health personnel conducting the epidemiological investigation depending upon the specifics of the epidemic.

- a. Clinical Case Definition An illness with acute onset of fever $\geq 101^{\circ}$ F followed by a rash characterized by vesicles or firm pustules in the same stage of development without other apparent cause.
- b. Laboratory Criteria for Confirmation* (to be conducted in Level C or D laboratories only)
 1. Isolation of smallpox (variola) virus from a clinical specimen (Level D laboratory only), or
 2. Polymerase chain reaction (PCR) identification of variola DNA in a clinical specimen, or
 3. Negative stain electron microscopy (EM) identification of variola virus in a clinical specimen (Level D laboratory or approved Level C laboratory).

*Level D laboratories include the CDC and USAMRIID. Initial confirmation of a smallpox outbreak requires testing in a Level D laboratory. Level C laboratories will assist with testing of clinical specimens following initial confirmation of an outbreak by CDC.

- c. Case Classification
 - *Confirmed:* A case of smallpox that is laboratory confirmed.
 - *Probable:* A case that meets the clinical case definition that is not laboratory confirmed but has an epidemiological link to another confirmed or probable case.
 - *Suspected:* A case that meets the clinical case definition but is not laboratory confirmed and does not have an epidemiological link to a confirmed or probable case of smallpox OR a case that has an atypical presentation that is not laboratory confirmed but has an epidemiological link to a confirmed or probable case of smallpox. Atypical presentations of smallpox include a) hemorrhagic lesions OR b) flat, velvety lesions not appearing as typical vesicles nor progressing to pustules.