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Pertussis Case Definitions and Classifications

Clinical case definition: A cough illness lasting at least 14 days with one of the following: paroxysms of coughing, inspiratory "whoop," or posttussive vomiting, and without other apparent cause, as reported by a health professional.

Case Classifications:

- **Laboratory-Confirmed Case:**

- An acute cough illness of any duration in which *Bordetella pertussis* has been isolated by culture from a patient specimen, OR
- An illness that meets the clinical case definition and is confirmed by polymerase chain reaction (PCR) for *B. pertussis*

- **Epidemiologically-linked Confirmed Case:**

- An illness that meets the clinical case definition AND has a direct epidemiologic link to a patient with an illness that has been laboratory-confirmed as pertussis by either culture or PCR.

- **Probable Case:**

- An illness that meets the clinical case definition, is not laboratory-confirmed (either not tested or tested with a negative result), and is not epidemiologically-linked to a laboratory-confirmed case.

- **Suspect Case:**

A clinical syndrome or illness consistent or compatible with pertussis and without other apparent cause such as:

- Any acute cough illness with paroxysmal cough or inspiratory whoop
- Any acute cough illness in a person who is a close contact to a patient with a confirmed or probable case
- Any cough associated with apnea in an infant
- Any acute cough illness lasting ≥ 7 days when there is a reported outbreak of pertussis in the community
- Any acute cough illness with positive PCR results for *B. pertussis* that does not meet the clinical case definition.

Visit the following link for a video clip of a child with pertussis:

<http://www.whoopingcough.net/video%20whooping%20cough.htm>

Acceptable laboratory confirmation: Detection of *B. pertussis* by either culture or PCR. Serologic and direct fluorescent antibody (DFA) tests are not acceptable.

Infectious period: 7 days before cough onset to 21 days after cough onset if untreated, or 5 days after initiation of appropriate antibiotic therapy. Infants aged <1 year with

pertussis remain infectious for longer periods (up to 42 days from cough onset) if untreated.

Epidemiologic link definition:

An individual with an epidemiologic link:

- Had close contact with a patient who had a laboratory-confirmed case AND
- That close contact occurred while the patient was infectious, AND
- Had illness onset 6-21 days (the incubation period of pertussis) after* close contact with the patient who had a laboratory-confirmed case.

*Note: A patient with an epidemiologic link may have onset before or after disease onset in the patient with a laboratory-confirmed case.

Close Contact:

Specific definitions of a contact will vary according to the situation. Transmission can be expected with:

- Direct face-to-face contact for a period (duration not defined) with a case-patient who is symptomatic (e.g., in the catarrhal or paroxysmal phases of illness).
Note: Catarrhal refers to first stage signs and symptoms of pertussis including cold-like illness, runny nose, sneezing and mild cough.
- Shared confined space in close proximity for a prolonged period of time, such as ≥ 1 hour, with a symptomatic case-patient.
- Direct contact with respiratory, oral, or nasal secretions from a symptomatic case-patient (e.g., an explosive cough or sneeze in the face, sharing food, sharing eating utensils during a meal, kissing, mouth-to-mouth resuscitation, or performing a full medical exam including examination of the nose and throat). Note: Droplet precautions apply only if the suspected exposure occurred within a 3-ft radius.
- Contact in a setting with known pertussis transmission: e.g., two or more cases in the same classroom or sports team, students working closely together, bus mates or carpool contacts, or other similar extensive interaction.

References:

CSTE Position Statement Number 09-ID-51. Pertussis (*Bordetella pertussis*)(whooping cough). 2010 case definition.

http://www.cdc.gov/ncphi/diss/nndss/casedef/pertussis_current.htm

CDC. Manual for the surveillance of vaccine-preventable diseases. 4th edition, 2008. Appendix 11-1: Instructions for using the pertussis surveillance worksheet.

<http://www.cdc.gov/vaccines/pubs/surv-manual/appx/appendix11-1-pertussis-instruc-508.pdf>