Wisconsin Division of Public Health Communicable Disease Surveillance Guideline

HEPATITIS A
Last revised August 5, 2011

I. IDENTIFICATION
   A. CLINICAL DESCRIPTION: An illness caused by the hepatitis A virus (HAV) typically characterized by abrupt onset of fever, malaise, nausea, abdominal discomfort, fatigue, and elevated serum aminotransferase levels; often followed within a few days by jaundice. Severity of illness is highly variable and is typically milder or asymptomatic in young children.
   
   B. REPORTING CRITERIA: Clinical diagnosis initially; laboratory confirmation required to meet case definition.
   
   C. LABORATORY CRITERIA FOR CONFIRMATION: Positive anti-HAV IgM serology
   
   D. WISCONSIN CASE DEFINITION: A person with a clinically compatible illness that is laboratory confirmed OR an asymptomatic person who is IgM anti-HAV positive and is linked epidemiologically to a confirmed case of hepatitis A

II. ACTIONS REQUIRED / PREVENTION MEASURES
   A. WISCONSIN DISEASE SURVEILLANCE CATEGORY I: Report IMMEDIATELY BY TELEPHONE to the patient's local health department upon identification of a confirmed or suspected case. The local health department shall then notify the state epidemiologist immediately of any confirmed or suspected cases. Within 24 hours submit a case report electronically through the Wisconsin Electronic Disease Surveillance System (WEDSS), by mail or fax using an Acute and Communicable Disease Case Report (F-44151), or by other means.
   
   B. EPIDEMIOLOGY REPORTS REQUIRED:
      • Electronically – Report through WEDSS, including appropriate disease-specific tabs OR
      • Paper Copy – Acute and Communicable Diseases Case Report (F-44151) Viral Hepatitis case report form
   
   C. PUBLIC HEALTH INTERVENTIONS:
      In accordance with Wisconsin Administrative rule DHS 145.05, local public health should follow the methods of control recommended in the current edition of Control of Communicable Diseases Manual, edited by David L. Heymann, published by the American Public Health Association.

      For further details regarding disease investigation, prophylaxis, and control measures, refer to the DPH publication Hepatitis A: A Handbook for Public Health Personnel

III. CONTACTS FOR CONSULTATION
   A. LOCAL HEALTH DEPARTMENT – REGIONAL OFFICES – TRIBAL AGENCIES:
   
   B. BCDER / COMMUNICABLE DISEASE EPIDEMIOLOGY SECTION: (608) 267-9003
IV. RELATED REFERENCES

