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Office of the Chief Medical Officer  
Epidemiology and Surveillance Unit

## **CASE DEFINITIONS FOR SYNDROMES UNDER SURVEILLANCE**

### **Acute Flaccid Paralysis (AFP)\*:**

Acute (sudden) onset of flaccid paralysis in the absence of trauma.

*\* Any patient in whom a healthcare worker suspects acute flaccid paralysis is considered to be a suspected case of poliomyelitis.*

### **Fever and Haemorrhagic symptoms:**

Acute (sudden) onset of fever (> 38.0°C or 100.4°F) in a previously healthy person, presenting with at least one haemorrhagic (bleeding) manifestation with or without jaundice (e.g. purpura, epistaxis, hemoptysis, melena).

### **Fever and Neurological symptoms (except AFP):**

Acute (sudden) onset of fever (> 38.0°C or 100.4°F) with or without headache and vomiting in a previously healthy person presenting with at least one of the following signs: meningeal irritation, convulsions, altered consciousness, altered sensory manifestations, paralysis except AFP.

### **Fever and Rash‡:**

Acute (sudden) febrile illness (>38.0°C or 100.4°F) in a previously healthy person, presenting generalized rash.

*‡ Any patient in whom a healthcare worker suspects measles or rubella infection is considered to be a suspected measles/rubella case. These patients generally have fever and generalized rash illnesses.*

### **Fever and Respiratory Symptoms (Acute Respiratory Infection):**

Acute (sudden) febrile illness (> 38.0°C or 100.4°F) in a previously healthy person, presenting with cough or sore throat with or without respiratory distress.

### **Gastroenteritis:**

Acute (sudden) onset of diarrhoea, with or without fever (> 38C or 100.4F) and presenting with 3 or more loose or watery stools in the past 24 hours, with or without dehydration, vomiting and/or visible blood.

### **Undifferentiated Fever:**

An acute (sudden) febrile illness (> 38.0°C or 100.4°F) in a previously healthy person of less than 7 days duration with **two or more** of the following manifestations: headache, retro-orbital pain, myalgia, arthralgia, nausea, vomiting, jaundice – AND without any particular symptoms fitting another syndrome definition. **Children < 5 years of age:** case management and specimen collection will vary according to the evolution of the clinical presentation.

**Alert factors, such as those listed below, should prompt further case investigation:**

Altered consciousness	Jaundice	Renal failure
Collapse	Recent travel	Visible blood in the stool