Event Name:	CPOX					
Event Time Period:	Lifelong Immunity					
Clinical Description (CDC 2023):	In the absence of a more likely alternative diagnosis*: An acute illness with a generalized rash with vesicles (maculopapulovesicular rash) OR An acute illness with a generalized rash without vesicles** (maculopapular rash). * Consider varicella when lesions in various stages of development are present at the same time ** This clinical criterion must be paired with epidemiologic linkage criteria for reporting to trigger a report to public health.					
CSTE Classification (2023):	Confirmed	 A case that meets the clinical case definition AND that is laboratory confirmed OR A case that meets the clinical case definition with a generalized rash with vesicles AND has a confirmatory epidemiologic linkage*. Laboratory confirmation by: I. Isolation of varicella zoster virus from a clinical specimen, or Direct fluorescent antibody (DFA) for VZV DNA, or Polymerase chain reaction (PCR) for VZV DNA, or Significant rise (at least 4-fold rise or seroconversion ^{1 2}) in paired acute and convalescent serum VZV immunoglobulin G (IgG) antibody level ³ *Confirmed Epi linkage: exposed to or contact with a lab confirmed varicella case, or linked to a cluster/outbreak with ≥1 lab confirmed case, or exposed to or contact with a person with shingles (regardless of lab confirmation). Not explained by varicella vaccination during the previous 6-45 days. *Seroconversion is defined as negative serum VZV IgG followed by a positive serum VZV IgG. *In vaccinated persons, a 4-fold rise may not occur. 				
	Probable	 A case that meets the clinical case definition with a generalized rash with vesicles OR A case that meets the clinical evidence with a generalized rash without vesicles AND a. Confirmatory or presumptive epidemiological linkage* OR b. Supportive laboratory evidence** OR A case meets healthcare record criteria*** AND a. Confirmatory or presumptive epidemiological linkage* OR b. Supportive laboratory evidence *Presumptive Epi linkage: exposed to or contact with a probable varicella case that had a generalized rash with vesicles. ** Supportive lab evidence: Positive test for serum VZV immunoglobulin M (IgM) antibody. *** Healthcare record criteria: Provider diagnosis of of vacicella or chickenpox but no rash description.				

MDPH Case Classification Manual Varicella

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Massachusetts Event	Confirmed	Follows CSTE classification
Classification:	&	
	Probable	

VARICELLA (CHICKEN POX) (continued)

Report Type	Test Type	Source	Result	New event or beyond report period?	Data Entry			
Laboratory report	Culture	Clinical specimen		Yes	New event SUSPECT			
				No	Same event			
Select:	Microorganism: PrId: Pt: Islt: Nom: Viral subtyping							
Laboratory report	PCR	Clinical specimen		Yes	New event SUSPECT			
				No	Same event			
Select:	Varicella zoster viru	is DNA: ACnc: Pt:	xxx: Ord: Probe.	Amp.Tar				
Laboratory report	Serology	CSF	Positive	Yes	New event SUSPECT			
				No	Same event			
Select (IgG)	Varicella zoster virus Ab :IgG :ACnc Pt :CSF :Qn							
Select (IgM specific):								
Select (IgG&IgM panel):		Varicella zoster virus Ab.IgG & IgM Panel: -: Pt: CSF: Qn:						
Laboratory report	Serology	Serum	Positive	Yes	New event SUSPECT			
	**	11 7 3 7 77		No	Same event			
Select (IgM specific):	Varicella zoster virus Ab.IgM: Titr: Pt: Ser: Qn:							
Laboratory report	IgM	Clinical specimen	Positive	Yes	New event SUSPECT			
				No	Same event			
Select (IgM specific):	Varicella zoster virus Ab IgM: ACnc: Pt: xxx: Ord:							
Laboratory report	DFA	Clinical specimen		Yes	New event SUSPECT			
				No	Same event			
Select:	Varicella zoster viru	ıs Ag: ACnc: Pt: xx	x: Ord: IF					
Laboratory report	Culture	Clinical specimen		Yes	New event SUSPECT			
				No	Same event			
Select:	Varicella zoster viru	is Identified: PrId: I	Pt: xxx: Nom: She	ell Vial Culture				