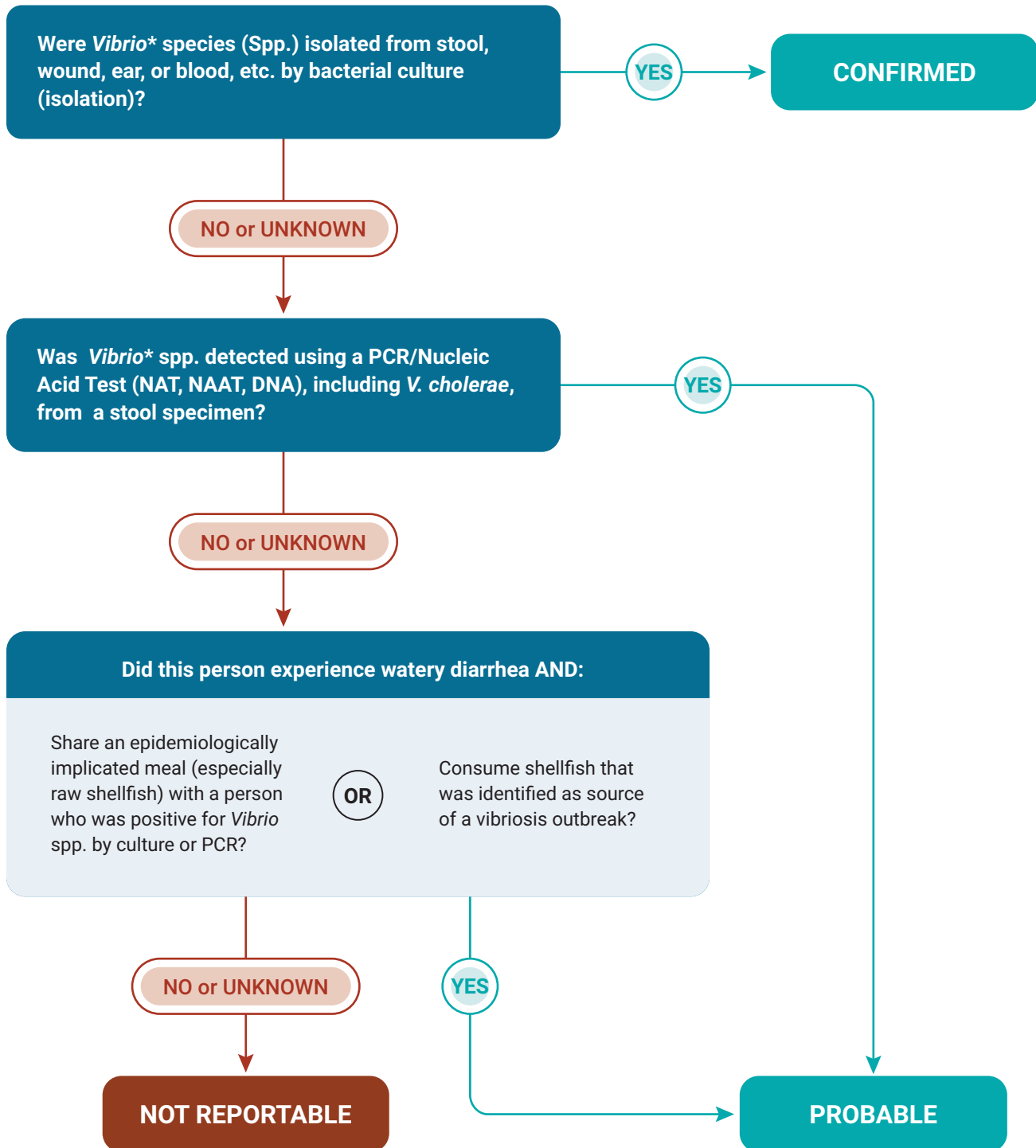


Algorithm for Case Classification: Vibriosis



* *V. alginolyticus*, *V. cholerae* non-O1, non-O139 (non-toxigenic), *V. cincinnatiensis*, *Photobacterium damsela* subsp. *Damsela*, *V. fluvialis*, *V. furnissii*, *Grimontia hollisae*, *V. metschnikovii*, *V. mimicus*, *V. parahaemolyticus*, *V. vulnificus*

Frequently Asked Questions and Answers

Why are *Vibrio cholerae* positive cases (by culture or PCR) assigned to the condition “Vibriosis” instead of “Cholera”?

In Washington State, almost all specimens positive for *Vibrio cholerae* (by culture or PCR) are non-toxin producing strains that cause vibriosis, not the disease “cholera.” As a precaution, all *V. cholerae* positive isolates are sent to CDC for serotyping and toxin testing. Suspect the disease “cholera” when a case PCR positive for *V. cholerae* or culture positive for *Vibrio* spp. has a recent history of travel to an endemic country – review the European Centre for Disease Prevention and Control website for a list updated monthly:

www.ecdc.europa.eu/en/all-topics-z/cholera/surveillance-and-disease-data/cholera-monthly

How should a case be classified when the specimen is culture positive at the clinical lab but the Public Health Lab identifies a different, non-vibrio organism (commonly *Aeromonas* Spp. or *Pseudomonas* Spp.)?

Classify as “Ruled Out.”

How should a case be classified if the specimen is culture positive at the clinical lab but the Public Health Lab is unable to grow the organism (result is “unable to stimulate bacterial growth” or “organism non-viable”)?

Classify as confirmed based upon the culture result at the clinical lab.

How should a case be classified if the specimen is PCR positive at the clinical lab but the specimen submitted to the Public Health Lab does not grow *Vibrio* spp. when cultured (result will be: *Vibrio* spp. not detected)?

Classify as probable based upon the PCR positive result at the clinical lab.

How should a case be classified if the specimen is PCR positive or culture positive for *Vibrio* spp. at the clinical lab but no specimen or isolate is submitted to the Public Health Lab?

Classify as probable if PCR positive at the clinical lab and confirmed if culture positive at the clinical lab.

Are there any clues to determining if the test was a culture versus a PCR/Nucleic Acid test?

Yes! Clues that indicate a culture was performed include the following: antibiotic sensitivities were performed, the description of the test includes the words “isolate” or “isolated” or “*Vibrio* organism identified,” an enumerated result such as “3+ VIBRIO PARAHAEMOLYTICUS” or the specimen source is blood, wound or ear.

For PCR tests, the description of the test will often include the words “detected,” “DNA,” “NAT,” “NAAT” or “GI Panel.” Also, PCRs are currently only done on stool.

Should asymptomatic cases be reported?

Culture-confirmed and PCR positive cases should be reported.

What is an example of an epidemiologic link?

Shared history of ingestion of inadequately cooked or raw seafood or foods cross-contaminated with seawater or raw seafood.