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Arboviral Encephalitis 1995 Case Definition | CDC  
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National Notifiable Diseases Surveillance System (NNDSS)  
Explore Topics  
Search  
Search  
Clear Input  
For Everyone  
About About National Notifiable Diseases Surveillance System  
What is Case Surveillance?  
Case Surveillance Modernization  
Infectious Disease Tables  
Non-Infectious Disease Data  
Technical Resource Center  
Case Surveillance in Action  
Contact Us  
View all  
Related Topics:  
NDC Application  
View All  
search  
close search  
search  
National Notifiable Diseases Surveillance System (NNDSS)  
Menu  
Close  
search  
For Everyone  
About About National Notifiable Diseases Surveillance System  
What is Case Surveillance?  
Case Surveillance Modernization  
Infectious Disease Tables  
Non-Infectious Disease Data  
Technical Resource Center  
Case Surveillance in Action  
Contact Us  
View All  
Related Topics  
NDC Application  
View All  
National Notifiable Diseases Surveillance System (NNDSS)  
About About National Notifiable Diseases Surveillance System  
What is Case Surveillance?  
Case Surveillance Modernization  
Infectious Disease Tables  
Non-Infectious Disease Data  
Technical Resource Center  
Case Surveillance in Action  
Contact Us  
View All  
April 16, 2021  
Case Definitions  
Message Mapping Guides  
Supporting Documents for Implementation  
Event Codes & Other Surveillance Resources  
Arboviral Encephalitis  
1995 Case Definition  
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NOTE:  
A surveillance case definition is a set of uniform criteria used to define a disease for public health surveillance. Surveillance case definitions enable public health officials to classify and count cases consistently across reporting jurisdictions. Surveillance case definitions are not intended to be used by healthcare providers for making a clinical diagnosis or determining how to meet an individual patient’s health needs.  
Subtype(s)  
California serogroup encephalitis  
Eastern equine encephalitis  
St. Louis encephalitis  
Western equine encephalitis  
Clinical Description  
Arboviral infection may result in a febrile illness of variable severity associated with neurologic symptoms ranging from headache to aseptic meningitis or encephalitis. Arboviral encephalitis cannot be distinguished clinically from other central nervous system infections. Symptoms may include headache; confusion or other alteration in sensorium; nausea; or vomiting. Signs may include fever, meningismus, cranial nerve palsies, paresis or paralysis, sensory deficits, altered reflexes, convulsions, abnormal movements, and coma of varying degree.  
Laboratory Criteria For Diagnosis  
Four-fold or greater change in serum antibody titer,  
OR  
Isolation of virus from or demonstration of viral antigen or genomic sequences in tissue, blood, cerebrospinal fluid (CSF), or other body fluid,  
OR  
Specific Immunoglobulin M antibody in CSF  
Case Classification  
Probable  
A clinically compatible illness occurring during a period when arboviral transmission is likely, and with the following supportive serology: a stable (less than two-fold change) elevated antibody titer to an arbovirus (e.g., greater than 320 by hemagglutination inhibition, greater than 128 by complement fixation, greater than 256 by immunofluorescence, and greater than160 by neutralization), or a positive serologic result by enzyme immunoassay (EIA).  
Confirmed  
A clinically compatible illness that is laboratory confirmed  
Comments  
The seasonality of arboviral transmission is variable and depends on the geographic location of exposure, the specific cycles of viral transmission, and local climatic conditions. Reporting should be etiology specific (see below—the first four encephalitides are nationally reportable to CDC):  
St. Louis encephalitis  
Western equine encephalitis  
Eastern equine encephalitis  
California encephalitis (includes infections from the following viruses: LaCrosse, Jamestown Canyon, Snowshoe Hare, Trivittatus, Keystone, and California encephalitis viruses)  
Powassan encephalitis  
Other central nervous system infections transmitted by mosquitoes, ticks, or midges (e.g. Venezuelan equine encephalitis, Cache Valley encephalitis)  
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Back to Top  
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Content Source:  
Case Definitions  
Message Mapping Guides  
Supporting Documents for Implementation  
Event Codes & Other Surveillance Resources  
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NNDSS receives and shares case data from state, local, and territorial health departments to help public health monitor, control, and prevent serious diseases.  
View All  
About About National Notifiable Diseases Surveillance System  
What is Case Surveillance?  
Case Surveillance Modernization  
Infectious Disease Tables  
Non-Infectious Disease Data  
Technical Resource Center  
Case Surveillance in Action  
Contact Us  
View All  
Sign up for Email Updates  
Contact CDC  
Organization  
Policies  
Web Policies  
Languages  
Languages  
Español  
Language Assistance  
Archive  
CDC Archive  
Public Health Publications  
Contact Us  
About CDC  
Organization  
Policies  
Web Policies  
Languages  
Languages  
Español  
Language Assistance  
Archive  
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