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Legionellosis: Legionnaires' Disease, Pontiac Fever or Extrapulmonary Legionellosis 2020 Case Definition | CDC  
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Legionellosis: Legionnaires' Disease, Pontiac Fever or Extrapulmonary Legionellosis  
2020 Case Definition  
Legionellosis: Legionnaires' Disease, Pontiac Fever or Extrapulmonary Legionellosis  
2020 Case Definition  
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.  
CSTE Position Statement(s)  
19-ID-04  
Clinical Criteria  
Legionellosis is associated with three clinically and epidemiologically distinct illnesses: Legionnaires’ disease, Pontiac fever, or extrapulmonary legionellosis.  
Legionnaires’ disease (LD):  
LD presents as pneumonia, diagnosed clinically and/or radiographically.  
Evidence of clinically compatible disease can be determined several ways: a) a clinical or radiographic diagnosis of pneumonia in the medical record  
OR  
b) if “pneumonia” is not recorded explicitly, a description of clinical symptoms that are consistent with a diagnosis of pneumonia  
1  
.  
Pontiac fever (PF):  
PF is a milder illness. While symptoms of PF  
2  
could appear similar to those described for LD, there are distinguishing clinical features. PF does not present as pneumonia. It is less severe than LD, rarely requiring hospitalization. PF is self-limited, meaning it resolves without antibiotic treatment.  
Extrapulmonary legionellosis (XPL):  
Legionella  
can cause disease at sites outside the lungs (for example, associated with endocarditis, wound infection, joint infection, graft infection). A diagnosis of extrapulmonary legionellosis is made when there is clinical evidence of disease at an extrapulmonary site and diagnostic testing indicates evidence of  
Legionella  
at that site.  
Laboratory Criteria  
Confirmatory laboratory evidence:  
Isolation of any  
Legionella  
organism from lower respiratory secretions, lung tissue, pleural fluid, or extrapulmonary site  
Detection of any  
Legionella  
species from lower respiratory secretions, lung tissue, pleural fluid, or extrapulmonary site by a validated nucleic acid amplification test  
Detection of  
Legionella pneumophila  
serogroup 1 antigen in urine using validated reagents  
Fourfold or greater rise in specific serum antibody titer to  
Legionella pneumophila  
serogroup 1 using validated reagents  
Presumptive laboratory evidence:  
None required for case classification  
Supportive laboratory evidence:  
Fourfold or greater rise in antibody titer to specific species or serogroups of  
Legionella  
other than  
L. pneumophila  
serogroup 1 (e.g.,  
L. micdadei  
,  
L. pneumophila  
serogroup 6)  
Fourfold or greater rise in antibody titer to multiple species of  
Legionella  
using pooled antigens.  
Detection of specific  
Legionella  
antigen or staining of the organism in lower respiratory secretions, lung tissue, pleural fluid, or extrapulmonary site associated with clinical disease by direct fluorescent antibody (DFA) staining, immunohistochemistry (IHC), or other similar method, using validated reagents  
Epidemiologic Linkage  
Epidemiologic link to a setting with a confirmed source of  
Legionella  
(e.g., positive environmental sampling result associated with a cruise ship, public accommodation, cooling tower, etc.).  
OR  
Epidemiologic link to a setting with a suspected source of  
Legionella  
that is associated with at least one confirmed case.  
Criteria to Distinguish a New Case from an Existing Case  
An individual should be considered a new case if their previous illness was followed by a period of recovery prior to acute onset of clinically compatible symptoms and subsequent laboratory evidence of infection. The recovery period for legionellosis can vary based on patient-specific factors. CDC consultation is encouraged for case classification of individuals without clear periods of recovery or subsequent acute illness onset.  
Case Classification  
Suspect  
Suspect Legionnaires’ disease (LD):  
A clinically compatible case of LD with supportive laboratory evidence for  
Legionella  
.  
Suspect Pontiac fever (PF):  
A clinically compatible case of PF with supportive laboratory evidence for  
Legionella  
.  
Suspect Extrapulmonary legionellosis (XPL):  
A clinically compatible case of XPL with supportive laboratory evidence of  
Legionella  
at an extrapulmonary site.  
Probable  
Probable Legionnaires’ disease (LD):  
A clinically compatible case with an epidemiologic link during the 14 days before onset of symptoms.  
Probable Pontiac fever (PF):  
A clinically compatible case with an epidemiologic link during the 3 days before onset of symptoms.  
Confirmed  
Confirmed Legionnaires’ disease (LD):  
A clinically compatible case of LD with confirmatory laboratory evidence for  
Legionella  
.  
Confirmed Pontiac fever (PF):  
A clinically compatible case of PF with confirmatory laboratory evidence for  
Legionella  
.  
Confirmed Extrapulmonary legionellosis (XPL):  
A clinically compatible case of XPL with confirmatory laboratory evidence of  
Legionella  
at an extrapulmonary site.  
Comments  
1  
Clinical symptoms of pneumonia may vary, but must include acute onset of lower respiratory illness with fever and/or cough. Additional symptoms could include myalgia, shortness of breath, headache, malaise, chest discomfort, confusion, nausea, diarrhea, or abdominal pain.  
2  
Clinical symptoms may vary, but must include acute symptom onset of one or more of the following: fever, chills, myalgia, malaise, headaches, fatigue, nausea and/or vomiting.  
Related Case Definition(s)  
Legionellosis / Legionnaires' Disease or Pontiac Fever | 2005 Case Definition  
Legionellosis / Legionnaires' Disease or Pontiac Fever | 1996 Case Definition  
Legionellosis / Legionnaires' Disease or Pontiac Fever | 1995 Case Definition  
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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.  
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