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Rubella / German Measles  
2025 Case Definition  
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2025 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)  
24-ID-10  
Background  
Acquired rubella, also known as “German measles”, is an acute viral illness that may be characterized by low-grade fever and mild maculopapular erythematous rash; about 25  
–  
50% of rubella infections are asymptomatic. Transmission occurs primarily via droplets or direct contact with nasal secretions of infected persons. The average incubation period of rubella virus is 17 days, with a range of 12 to 23 days.  
1  
Persons with rubella are most infectious when rash is erupting, but they can shed virus from 7 days before to 7 days after rash onset. Prodromal symptoms may include fever, conjunctivitis, and lymphadenopathy. Arthralgia or arthritis are commonly observed in adults, particularly in women, and rare complications include thrombocytopenic purpura and encephalitis. Rubella infection in pregnancy can result in serious outcomes, such as miscarriage, stillbirth, or congenital rubella syndrome (CRS), which is commonly characterized by hearing impairment, heart defects, and eye anomalies.  
2  
Clinical Criteria  
In the absence of a more likely alternative diagnosis:  
Acute onset of generalized maculopapular rash,  
AND  
Fever (measured [greater than 99.0°F] or subjective),  
AND  
Lymphadenopathy (cervical),  
OR  
Arthralgia or arthritis,  
OR  
Conjunctivitis  
Laboratory Criteria  
Confirmatory Laboratory Evidence:  
Detection of rubella virus (e.g., RT-PCR, culture, next generation sequencing [NGS])  
OR  
Significant rise, defined as seroconversion or at least a 4-fold rise in titer, observed in paired acute and convalescent serum rubella IgG antibody levels\*,  
OR  
Positive serologic rubella IgM antibody\*  
,  
\*\*  
AND  
low IgG avidity\*  
Presumptive Laboratory Evidence:  
Positive serologic rubella IgM antibody\*  
,  
\*\*  
,  
†  
Note: The categorical labels used here to stratify laboratory evidence are intended to support the standardization of case classifications for public health surveillance. These categorical labels should not be used to interpret the utility or validity of any laboratory test methodology.  
\*  
In the absence of rubella vaccination during the previous 6-45 days.  
\*\*  
Acquired rubella was suspected, testing not conducted as part of routine immunity screening (e.g., titers for employment documentation).  
†  
When not superseded by more specific testing in a public health laboratory.  
Epidemiologic Linkage  
Contact with a laboratory-confirmed^ rubella or congenital rubella case during the case’s likely infectious period,  
OR  
Close contact (e.g., household contact) with a laboratory-confirmed^ rubella or congenital rubella case during the case’s likely infectious period,  
OR  
International travel in the 23 days prior to rash onset,  
OR  
Gave birth to an infant with confirmed congenital rubella^^  
^  
“Laboratory-confirmed” case is a case that meets confirmatory laboratory evidence.  
^^  
When residency criteria are met for pregnant person at time of presumed illness  
Criteria to Distinguish a New Case from an Existing Case  
The following should be enumerated as a new case††:  
Person newly meets the criteria for a confirmed or probable case,  
Person who was previously reported but not enumerated as a confirmed or probable case, but due to subsequently available information now meets the criteria for a confirmed or probable case.  
††  
Note: Persistent rubella infections and congenital rubella syndrome should not be enumerated as new cases.  
Case Classification  
Probable  
Meets clinical criteria  
AND  
meets presumptive laboratory evidence  
AND  
lacks presumptive evidence of rubella immunity prior to infection.  
Confirmed  
Meets confirmatory laboratory evidence,  
OR  
Meets presumptive laboratory evidence  
AND  
epidemiologic linkage criterion of “contact with a laboratory-confirmed^ rubella or congenital rubella case during the case’s likely infectious period”,  
OR  
Meets clinical criteria,  
AND  
Meets epidemiologic linkage criterion of “close contact (e.g., household contact) with a laboratory-confirmed^ rubella or congenital rubella case during the case’s likely infectious period”,  
OR  
Meets presumptive laboratory evidence  
AND  
meets epidemiologic linkage criterion of “international travel in the 23 days prior to rash onset”  
AND  
lacks presumptive evidence of rubella immunity prior to  
infection,  
OR  
Meets epidemiologic linkage criterion of “gave birth to an infant with confirmed congenital rubella.”  
^  
“Laboratory-confirmed” case is a case that meets confirmatory laboratory evidence.  
Other Criteria  
Lacks presumptive evidence of rubella immunity prior to infection^^^  
^^^  
Presumptive evidence of immunity is defined in Reference 3 (Table 3).  
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Related Case Definition(s)  
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Rubella / German Measles | 2010 Case Definition  
Rubella / German Measles | 2009 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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