Appendix B: Provincial Case Definitions for Diseases of Public Health Significance

Disease: Listeriosis

Effective: February 2019
Listeriosis

1.0 Provincial Reporting
Confirmed and probable cases of disease

2.0 Type of Surveillance
Case-by-case

3.0 Case Classification

3.1 Confirmed Case
Laboratory confirmation of infection, with clinically compatible signs and symptoms, with the:

- Isolation of *Listeria monocytogenes* (*L. monocytogenes*) from a site which is normally sterile (e.g., blood, cerebrospinal fluid (CSF) or, less commonly, joint, pleural, pericardial fluid);

  OR

- Isolation of *L. monocytogenes* from miscarried or stillbirth placental or fetal tissue.

3.2 Probable Case
Clinically compatible signs and symptoms in a person with an epidemiologic link to a laboratory-confirmed case or to a confirmed source (e.g., contaminated milk, soft cheeses, ready-to-eat meats).

4.0 Laboratory Evidence

4.1 Laboratory Confirmation
Any of the following will constitute a confirmed case of listeriosis:

- Isolation of *L. monocytogenes* from a normally sterile site (e.g., blood, CSF, or less commonly, joint, pleural, pericardial fluid); or

- In the setting of miscarriage or stillbirth, isolation of *L. monocytogenes* from placental or fetal tissue.

4.2 Approved/Validated Tests
Bacteriological ID from the organism. Samples are then sent to the National Microbiology Laboratory (NML) for typing.
4.3 Indications and Limitations
No serology testing available through the Public Health Ontario Laboratories.

5.0 Clinical Evidence
Clinically compatible signs and symptoms are characterized by meningitis or bacteremia; infection during pregnancy may result in fetal loss through miscarriage or stillbirth, or neonatal meningitis or septicemia. Pregnant women may experience mild symptoms.

6.0 ICD 10 Code(s)
A32 Listeriosis (includes listerial foodborne infection; excludes neonatal (disseminated) listeriosis P37.2)
   A32.0 Cutaneous listeriosis
   A32.1 Listerial meningitis and meningoencephalitis (Listerial: meningitis [G01]; meningoencephalitis [G05.0])
   A32.7 Listerial septicaemia
   A32.8 Other forms of listeriosis (Listerial: cerebral arteritis [I68.1]; endocarditis [I39.8]; Oculoglandular listeriosis)
   A32.9 Listeriosis, unspecified

7.0 Comments
In an outbreak situation, report confirmed cases of the diarrheal form of *Listeria monocytogenes* (isolated in stool).
Sporadic cases of the diarrheal form of Listeriosis are not reportable.

8.0 Sources
# 9.0 Document History

Table 1: History of Revisions

<table>
<thead>
<tr>
<th>Revision Date</th>
<th>Document Section</th>
<th>Description of Revisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 2015</td>
<td>General</td>
<td>New template. Title of Section 8.0 changed from “References” to “Sources”. Section 9.0 Document History added.</td>
</tr>
<tr>
<td>April 2015</td>
<td>4.3 Indications and Limitations</td>
<td>Revised name of the Public Health Ontario Laboratories.</td>
</tr>
<tr>
<td>April 2015</td>
<td>8.0 Sources</td>
<td>Updated.</td>
</tr>
<tr>
<td>February 2019</td>
<td>General</td>
<td>Minor revisions were made to support the regulation change to Diseases of Public Health Significance.</td>
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