Appendix B: Provincial Case Definitions for Reportable Diseases

Disease: Meningitis, acute: i) bacterial; ii) viral, and iii) other
Meningitis, acute: i) bacterial; ii) viral, and iii) other

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
Clinically compatible signs and symptoms of meningitis with:

- Isolation of an organism (i.e., bacterial, viral or other) from an appropriate clinical site (e.g., cerebrospinal fluid [CSF], blood)
  OR
- Detection of antigen (i.e., bacterial, viral or other) from an appropriate clinical site (e.g., CSF, blood)
  OR
- Detection of nucleic acid (i.e., bacterial, viral or other) from an appropriate clinical site (e.g., CSF, blood)
  OR
- Serologic confirmation of infection with an organism known to cause meningitis

3.2 Probable Case
Clinically compatible signs and symptoms of meningitis in the absence of laboratory confirmation of a causative organism

4.0 Laboratory Evidence
Given the variability of etiological organisms, consult with laboratory about appropriate specimens and testing methodologies

5.0 Clinical Evidence
Clinically compatible signs and symptoms are characterized by fever, headache, stiff neck, and pleocytosis.

6.0 ICD Code(s)

6.1 ICD 10 Code
G01 Bacterial
6.2 ICD 10 Code
G02.0 Viral

6.3 ICD 10 Code
G03.9 Other causes

7.0 Comments

Exclusionary Criteria for Meeting the Case Definition

Meningitis due to *Haemophilus influenzae* type b, *Neisseria meningitidis*, *Streptococcus pneumoniae* or *Listeria monocytogenes* should be reported under the corresponding diseases.

8.0 References


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