

Appendix B: Provincial Case Definitions for Reportable Diseases

Disease: Herpes, neonatal

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1.0 Provincial Reporting

Confirmed cases of disease

2.0 Type of Surveillance

Case-by-case

3.0 Case Classification

3.1 Confirmed Case

Clinically compatible signs and symptoms with detection of herpes simplex virus (HSV) in an infant (most commonly occurs in infants less than or equal to 28 days in age)

4.0 Laboratory Evidence

4.1 Laboratory Confirmation

Any of the following will constitute a confirmed case of Herpes:

- Positive herpes simplex virus culture
- Positive for herpes simplex virus nucleic acid

4.2 Approved/Validated Tests

- Standard culture for herpes simplex virus with confirmation
- Nucleic acid amplification test (NAT) for herpes simplex virus

4.3 Indications and Limitations

- N/A

5.0 Clinical Evidence

Infants exposed to HSV during birth, as documented by maternal virologic testing or presumed by observation of maternal lesions, should be followed carefully in consultation with a specialist. Clinically, neonatal infection is classified as skin-eye-mouth (SEM), central nervous system (CNS) or disseminated infection. A clinical consultation is necessary for diagnosis.

6.0 ICD Code(s)

ICD 10 Code P35.2

7.0 Comments

N/A

8.0 References

- Public Health Agency of Canada. Canadian guidelines on sexually transmitted infections. Ottawa: Public Health Agency of Canada; 2008. Available from http://www.phac-aspc.gc.ca/std-mts/sti_2006/pdf/Guidelines_Eng_complete_06-26-08.pdf.
- Centers for Disease Control and Prevention, Workowski KA, Berman SM. Sexually transmitted diseases treatment guidelines, 2006. MMWR Recomm Rep.

2006;55(RR-11):1-94. Available from
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5511a1.htm>.

- Ministry of Health and Long-Term Care, Public Health Division. iPHIS manual. Toronto, ON: Queen's Printer for Ontario; 2005.

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