

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

Disease: Blastomycosis

Effective: February 2019

Blastomycosis

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:

- Positive *Blastomyces dermatitidis* or *Blastomyces gilchristii* (*B. dermatitidis/gilchristii*) culture with confirmation using a validated method;
OR
- Molecular confirmation by nucleic acid amplification test (NAAT) testing or through sequencing analysis

3.2 Probable case

Laboratory evidence of infection by visualization of characteristic *B. dermatitidis/gilchristii* large, broad-based, budding yeast through direct microscopic examination of patient specimens.

4.0 Laboratory Evidence

4.1 Laboratory Confirmation

Any of the following will constitute laboratory confirmation of a case of Blastomycosis:

- Positive *B. dermatitidis/gilchristii* culture with confirmation using a validated method
- Molecular confirmation by NAAT testing or through sequencing analysis

4.2 Approved/Validated Tests

- Standard culture for *B. dermatitidis/gilchristii* with confirmation using a validated method
- Direct visual exam by microscopy
- Molecular confirmation by NAAT testing or through sequence analysis

5.0 ICD 10 Code(s)

B40.0 Acute pulmonary blastomycosis

B40.1 Chronic pulmonary blastomycosis

B40.2 Pulmonary blastomycosis, unspecified

B40.3 Cutaneous blastomycosis

B40.7 Disseminated blastomycosis Incl.: Generalized blastomycosis

B40.8 Other forms of blastomycosis

B40.9 Blastomycosis, unspecified

6.0 Comments

Although urine antigen and serological testing is available, the sensitivity and specificity are poor, and therefore they are not generally recommended. If a patient has a reactive *Blastomyces* serology result, it is recommended that appropriate specimens be collected for microscopy and culture.

7.0 Sources

Chapman SW, Dismukes WE, Proia LA, Bradsher RW, Pappas PG, Threlkeld MG, et al. Clinical practice guidelines for the management of blastomycosis: 2008 update by the Infectious Diseases Society of America. *Clinical Infectious Diseases*. 2008;46(12):1801-12.

Heymann DL, editor. *Control of Communicable Diseases Manual*. 20 ed. Washington, D.C: American Public Health Association; 2015.

Manitoba Communicable Disease Control Unit. *Blastomycosis Communicable Disease Management Protocol*. Winnipeg, MB: Government of Manitoba; 2007. Available from: <https://www.gov.mb.ca/health/publichealth/cdc/protocol/>

8.0 Document History

Table 1: History of Revisions

Revision Date	Document Section	Description of Revisions
March 2018	Entire appendix developed.	Blastomycosis was designated as a disease of public health significance effective May 1, 2018.
February 2019	Entire document	Formatting changes only.

