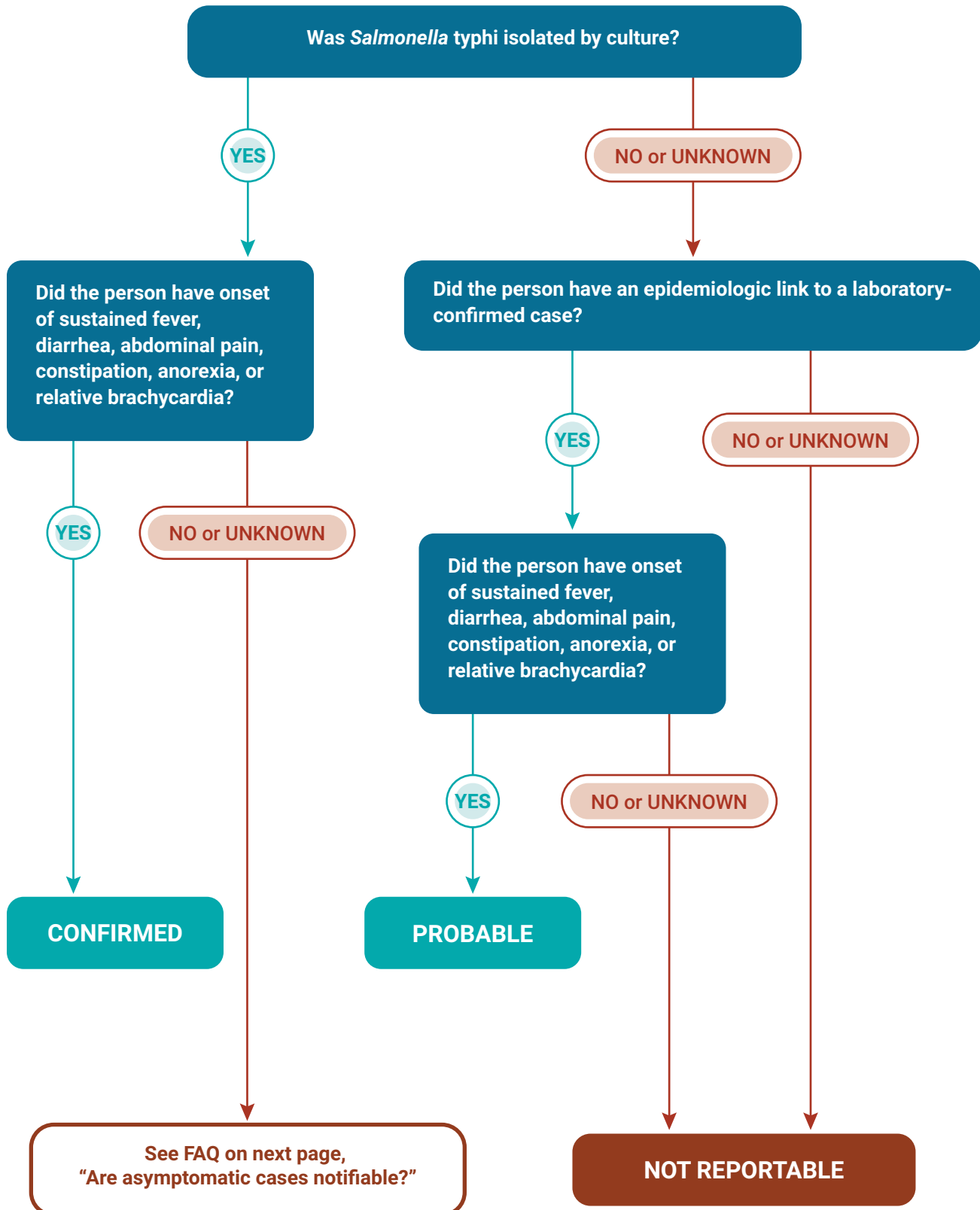


Algorithm for Case Classification: Typhoid Fever



Frequently Asked Questions and Answers

What laboratory methods are used for diagnosis?

- Culture of *S. Typhi* from blood, stool, urine or other clinical specimens including bone marrow
- PCR of *Salmonella* from stool (requires culture to confirm *S. Typhi*)
- Serologic evidence without isolation of *S. Typhi* is not considered sufficient for diagnosis

Note: Clinical laboratories must submit *Salmonella* isolates including *S. Typhi* and PCR+ stool specimens to Washington State Public Health Laboratories for culture confirmation, serotyping and whole genome sequencing

Are asymptomatic cases notifiable?

An asymptomatic person who tests positive for *S. Typhi* and has no history of a typhoid fever diagnosis (in Washington State or elsewhere) should be reported as a confirmed case and should, like all persons infected with *S. Typhi*, be supervised by the local health jurisdiction (LHJ) until they have submitted three consecutive stools that test negative for *Salmonella*.

An asymptomatic person who tests positive for *S. Typhi* and was diagnosed with typhoid fever >12 months previously is considered a chronic carrier. The case should be classified as confirmed, and the investigation status should be “not reportable to DOH”.

Any person infected with *S. Typhi*, symptomatic or asymptomatic, should be supervised by the local health jurisdiction (LHJ) until they have submitted three consecutive stools that have tested negative for *Salmonella*.

What is a chronic typhoid carrier?

A chronic carrier of typhoid is a person who continues to excrete *Salmonella Typhi*, asymptotically, for more than twelve months after initial illness.

How should illness caused by *S. paratyphi* be reported?

S. Paratyphi infection is reported as Salmonellosis. The CDC Typhoid and Paratyphoid Case Report form should be completed for cases of Typhoid and Paratyphoid fever: <https://www.cdc.gov/nationalsurveillance/PDFs/typhi-surveillance-form.pdf>

Most *Salmonella Paratyphi* infections in Washington are *Salmonella Paratyphi B var. L(+)* tartrate+, (formerly known as “Java”). This serotype causes Salmonellosis – not paratyphoid fever (despite its name).

What is an example of an epidemiologic link?

When a Confirmed or Probable case:

- Is a close contact and/or household member, particularly recent arrivals to the country
- Shared potentially contaminated drinking or recreational water source
- Has a shared history of meals from a restaurant or public gathering
- Has a shared connection to child care facility

What should be reported?

Immediately report a suspected outbreak.

If an outbreak is suspected, also report symptomatic persons without laboratory results who shared the exposure with a Confirmed or Probable case.