ANNEX 1. Syndromes under Surveillance

The syndromes under regional surveillance include the following:

- Acute Flaccid Paralysis (AFP)
- Fever and Respiratory Symptoms (Influenza-like Illness, Acute Respiratory Infections, and Severe Acute Respiratory Infections)
- Fever and Haemorrhagic Symptoms
- Fever and Neurological Symptoms (except AFP)
- Fever and Rash
- Gastroenteritis
- Undifferentiated Fever

Acute Flaccid Paralysis (AFP)

Case definition:
Acute (sudden) onset of flaccid paralysis in the absence of trauma.

Possible aetiology:
Poliomyelitis, Zika, heavy metal poisoning, snake poisoning

Fever and Respiratory Symptoms (Influenza-like Illness and Severe Acute Respiratory Infections)

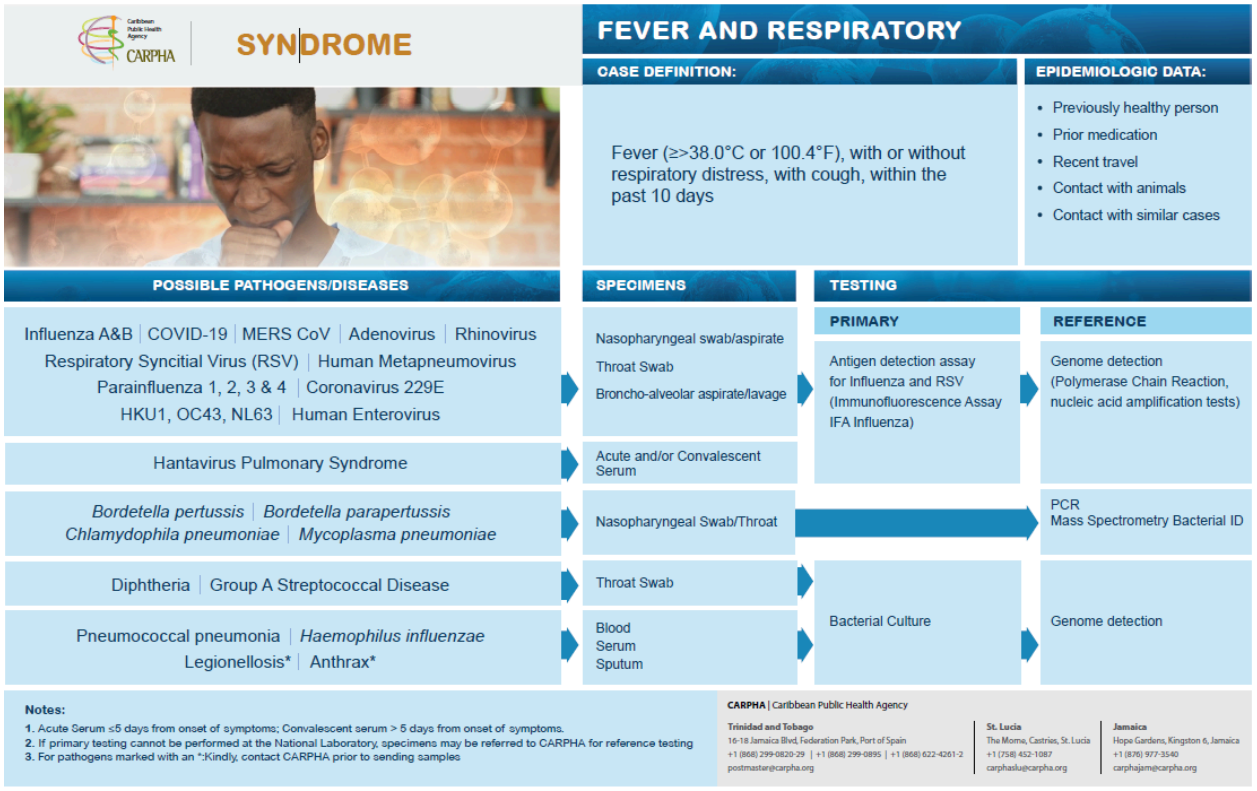
Case definition:
ARI case definition – An acute respiratory infection – (having at least one of the following: shortness of breath; cough, sore throat, coryza) with:
• Reported fever of ≥ 38°C;
• and cough;
• with onset within the last 10 days

ILI case definition – An acute respiratory infection with:
• Measured fever of ≥ 38°C;
• and cough;
• with onset within the last 10 days

SARI case definition – An acute respiratory infection with:
• History of fever or measured fever of ≥ 38°C;
• and cough;
• with onset within the last 10 days;
• and requires hospitalization

Possible aetiology:

Influenza, Respiratory Syncytial Virus (RSV), Metapneumovirus, SARS-CoV 1 & 2, MERS-CoV, Hantavirus, Leptospirosis, Pertussis, Diphtheria, Streptococcal disease (Group A), Pneumococcal pneumonia, *Haemophilus influenzae*, Legionellosis, Anthrax.



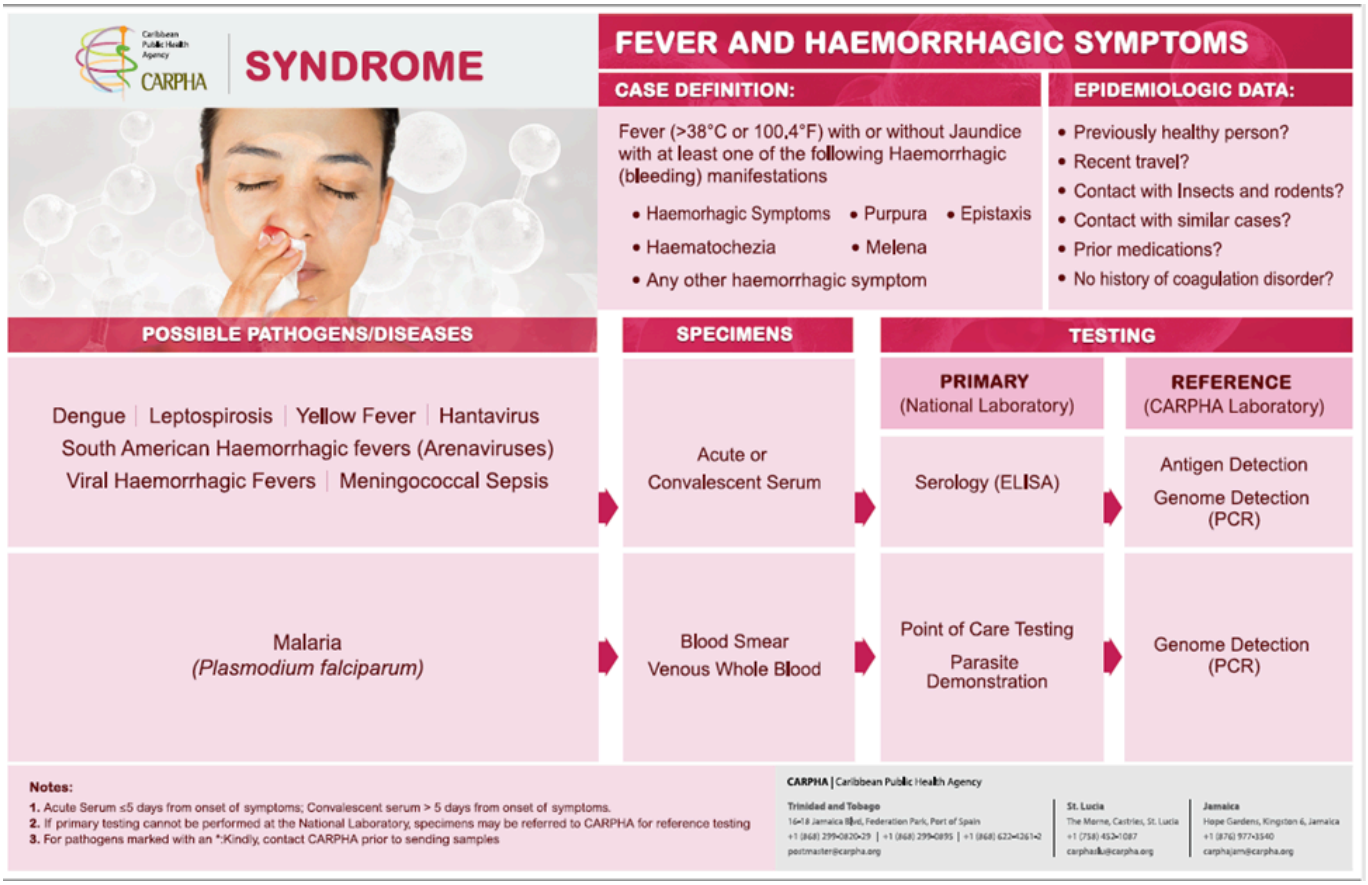
Fever and Haemorrhagic Symptoms

Case definition:

Acute (sudden) onset of fever in a previously healthy person, presenting with at least one haemorrhagic (bleeding) manifestation with or without jaundice (e.g. purpura, epistaxis, haemoptysis, melena).

Possible aetiology:

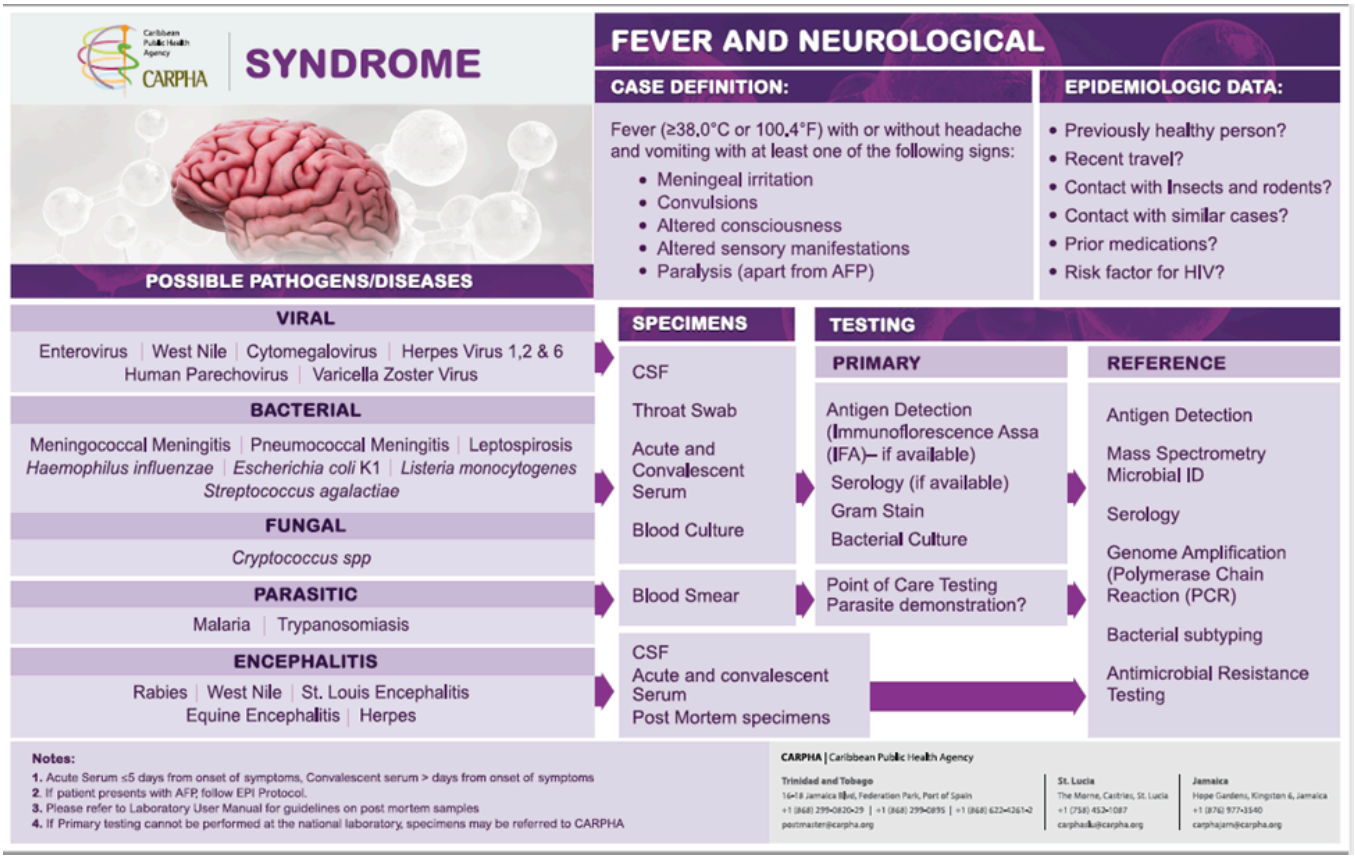
Dengue Fever, Leptospirosis, Yellow Fever, Hantaviruses, South American haemorrhagic fevers (arenaviruses: Guanarito, Junin, Machupo, Sabia viruses), Malaria (*Plasmodium falciparum*), Ebola Haemorrhagic fever, Lassa Fever.



Fever and Neurological Symptoms (except AFP):

Case definition:
Acute (sudden) onset of fever with or without headache and vomiting in a previously healthy person presenting with at least one of the following signs: meningeal irritation, convulsions, altered consciousness, altered sensory manifestations, paralysis (except AFP)

Possible aetiology:
Meningitis/Meningoencephalitis
Viral: Enterovirus, West Nile, Adenovirus, Herpes, Mumps, Varicella-Zoster
Bacterial: Meningococcal meningitis, Pneumococcal meningitis, *Haemophilus influenzae*, Leptospirosis
Parasitic: Malaria (*Plasmodium falciparum*), Trypanosomiasis
Encephalitis: Rabies, West Nile, Herpes, St. Louis Encephalitis, Venezuelan-, Eastern-, Western-Equine Encephalitis



Fever and Rash

Case definition:
Acute (sudden) febrile illness (>38.0°C or 100.4°F) in a previously healthy person, presenting generalized maculo-papular rash.

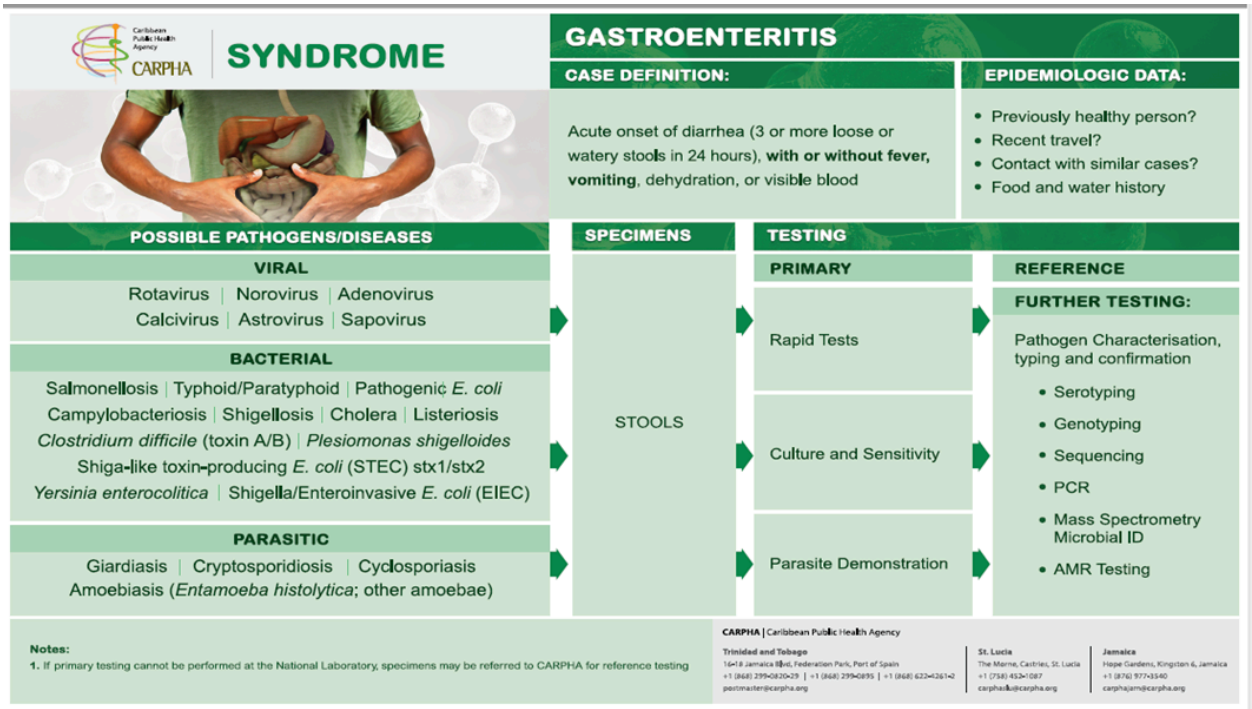
Possible aetiology:
Measles, rubella, chickenpox

Gastroenteritis

Case definition:
Acute onset of diarrhoea, with or without fever, and presenting with 3 or more loose stools or watery stools in the past 24 hours, with or without dehydration, vomiting and/or visible blood.

Possible aetiology:
Viral gastroenteritis: Norovirus, Rotavirus (Group A, B or C), Adenovirus, Calicivirus, Astrovirus, Hepatitis A
Bacterial gastroenteritis: Pathogenic *E. coli* (EHEC, ETEC), Campylobacteriosis, Cholera, Shigellosis, Salmonellosis, Typhoid/Paratyphoid

Parasitic gastroenteritis: Giardiasis, Amoebiasis (e.g. *Entamoeba histolitica*), Cryptosporidium, Cyclospora.



Undifferentiated Fever

Case definition:
An acute (sudden) febrile illness in a previously healthy person of less than seven (7) days duration with **two or more** of the following manifestations: headache, retro-orbital pain, myalgia, arthralgia, nausea, vomiting, jaundice, rash – AND without any symptoms fitting another syndrome definition.

Possible aetiology:
Dengue Fever, Chikungunya, Leptospirosis, Malaria, Other Arboviral fevers, Viral Hepatitis, Hantavirus, Brucellosis, Typhoid/Paratyphoid, Meningococcal infection, Borreliosis, Ebola Haemorrhagic Fever, Mumps

Caribbean Public Health Agency
CARPHA

SYNDROME

UNDIFFERENTIATED FEVER

CASE DEFINITION:

Fever (>38.0°C or 100.4°F), with two or more of the following symptoms:

- Headache
- Retro-orbital Pain
- Arthralgia
- Myalgia
- Nausea
- Vomiting
- Jaundice
- Arthritis

EPIDEMIOLOGIC DATA:

- Previously healthy person?
- Recent travel?
- Contact with insects and rodents?
- Contact with similar cases?
- Prior medications?

POSSIBLE PATHOGENS/DISEASES	SPECIMENS	TESTING	
		PRIMARY	REFERENCE
Dengue | Zika | Chikungunya | Mayaro Viruses Other arboviral fevers | Leptospirosis | Hantavirus	Acute and/or convalescent serum Whole Blood Urine	Antigen Detection (Immunoflorescence Assay (IFA) if available Serology	Viral Isolation Antigen detection Genome detection (Polymerase Chain Reaction (PCR))
Brucellosis | Typhoid/Paratyphoid Meningococcal infection	Whole Blood Serum	Blood smear Serum	Bacterial subtyping Antimicrobial Resistance Testing Mass Spectrometry Microbial ID
Malaria *(Plasmodium spp.)* | Borreliosis	Blood smear Serum	Parasite demonstration Serology Rapid Diagnostic Testing	PCR

Notes:

1. Acute Serum ≤5 days from onset of symptoms; Convalescent serum > 5 days from onset of symptoms
2. If primary testing cannot be performed at the National Laboratory, specimens may be referred to CARPHA for reference testing
3. Measles and Rubella must be tested for is rash is present in children, as per the EPI programme protocol

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