

Yersiniosis (enterocolitica or pseudotuberculosis spp)

Clinical Criteria

An illness of variable severity commonly manifested by watery diarrhea, abdominal pain, nausea, vomiting and sometimes fever. Complications are rare and can include skin rash, joint pains, or spread of bacteria to the bloodstream.

Laboratory Criteria for Diagnosis

Probable: Detection of *Yersinia* spp.(not *Y. pestis*) in a clinical specimen using a culture independent diagnostic test (CIDT).

Confirmed: Isolation of *Yersinia* spp. (not *Y. pestis*) from a clinical specimen.

Epidemiologic Linkage

Probable: A clinically compatible case that is epidemiologically linked to a case that meets the probable or confirmed laboratory criteria for diagnosis.

Criteria to Distinguish a New Case from an Existing Case

A case should not be counted as a new case if laboratory results were reported within 30 days of a previously reported infection in the same individual.

Case Classification

Probable

A case that meets the probable laboratory criteria for diagnosis or a clinically compatible case that is epidemiologically linked to a probable or confirmed case.

Confirmed

A case that meets the confirmed laboratory criteria for diagnosis.

Comments

The use of CIDTs as stand-alone tests for the direct detection of *Yersinia* spp in stool is increasing. Data regarding their performance indicate variability in the sensitivity, specificity, and positive predictive value of these assays depending on the manufacturer (CDC unpublished data). It is therefore useful to collect information on the laboratory conducting the testing using the laboratory's unique Clinical Laboratory Improvement Amendments (CLIA) number, and when possible, type and manufacturer of the CIDT used to diagnose each case. Culture confirmation of CIDT-positive specimens is ideal, but not practical to achieve in most jurisdictions.