IASR

Reporting Criteria for Rubella

(1) Definition

Acute febrile exanthematous disease caused by rubella virus infection

(2) Clinical manifestations

The virus is transmitted by droplet infection. The incubation period is 2-3 weeks. The epidemic season is from winter to spring. Small erythema and pink papule, lymphadenopathy (systemic, particularly in the neck, occipital and postauricular regions) and fever are the classic triad. Lymphadenopathy appears several days before appearance of rash and regresses in 3-6 weeks. Fever of 38-39°C continues for about 3 days. The rash disappears within 3 days. Encephalitis or thrombocytopenia purpura may occur as complications. An infected pregnant woman may give birth to a child with congenital rubella syndrome.

(3) Reporting criteria

a) "Patients (confirmed cases)"

In compliance with Article 12 paragraph 1 of the Infectious Diseases Control Law, if a physician has examined a patient with clinical signs and symptoms as described in (2), suspected rubella, and considered the patient meets the requirements for the notification as described in (4), the physician shall notify the case within 7 days.

b) "Deceased"

In compliance with Article 12 paragraph 1 of the Infectious Diseases Control Law, if a physician has examined a deceased person with clinical signs and symptoms as described in (2), suspected rubella, and considered that the patient meets the requirements for the notification as described in (4), the physician shall notify the case within 7 days.

(4) Notification criteria

a) Laboratory confirmed case

More than one symptom of the triad present and satisfaction of at least one laboratory criteria for notification

b) Clinically confirmed case

Presence of all three symptoms of the triad

Clinical criteria for notification

a. Small erythema and pink papule on the whole body
b. Fever
c. Lymphadenopathy

Laboratory criteria for notification

Laboratory method	Specimen
Detection of pathogens by isolation and identification	Throat swab, blood, cerebrospinal fluid, urine
Direct detection of the pathogen's genome by PCR	
Detection of IgM (increase in antibody titer in paired serum specimens or seroconversion positive)	Serum