**Shiga Toxin-Producing *Escherichia coli* (STEC)**

**2018 Council of State and Territorial Epidemiologists (CSTE) Case Definition**

Diagram for CDPH Case Classification and Reporting

A person with:
- Isolation of *E. coli* O157:H7 from a clinical specimen, **OR**
- Isolation of *E. coli* from a clinical specimen with detection of Shiga toxin or Shiga toxin genes

**CONFIRMED**

A person with isolation of *E. coli* O157 from a clinical specimen without confirmation of H antigen, detection of Shiga toxin, or detection of Shiga toxin genes

**PROBABLE**

A person that is:
- Epidemiologically linked to a confirmed or probable case with laboratory evidence, **OR**
- A member of a risk group as defined by public health authorities during an outbreak

**NOT A CASE**

A person with:
- Detection of Shiga toxin or Shiga toxin genes in a clinical specimen using a culture-independent diagnostic test (CIDT) and no known isolation of *Shigella* from a clinical specimen, **OR**
- Detection of *E. coli* O157 or STEC/Enterohemorrhagic *E. coli* (EHEC) in a clinical specimen using CIDT, **OR**
- Identification of an elevated antibody titer against a known Shiga toxin-producing serogroup of *E. coli*

**SUSPECTED**

A person with diagnosis of post-diarrheal HUS/TTP?

**SUSPECTED**

**NOT A CASE**

**CLASSIFICATION**

**STEC WITH HUS (Confirmed)**

**STEC WITHOUT HUS (Confirmed)**

**STEC WITH HUS (Probable)**

**STEC WITHOUT HUS (Probable)**

**HUS WITHOUT EVIDENCE OF STEC**

Note: Isolation or detection by any laboratory should be used for case classification, even when clinical and public health laboratory results are discordant


3 Clinically compatible illness includes one or more of the following: diarrhea (three or more loose stools within 24 hours), bloody diarrhea, abdominal cramps, hemolytic uremic syndrome (HUS)

4 Case is considered Suspected STEC but should be reported to CDPH as “HUS without evidence of STEC”