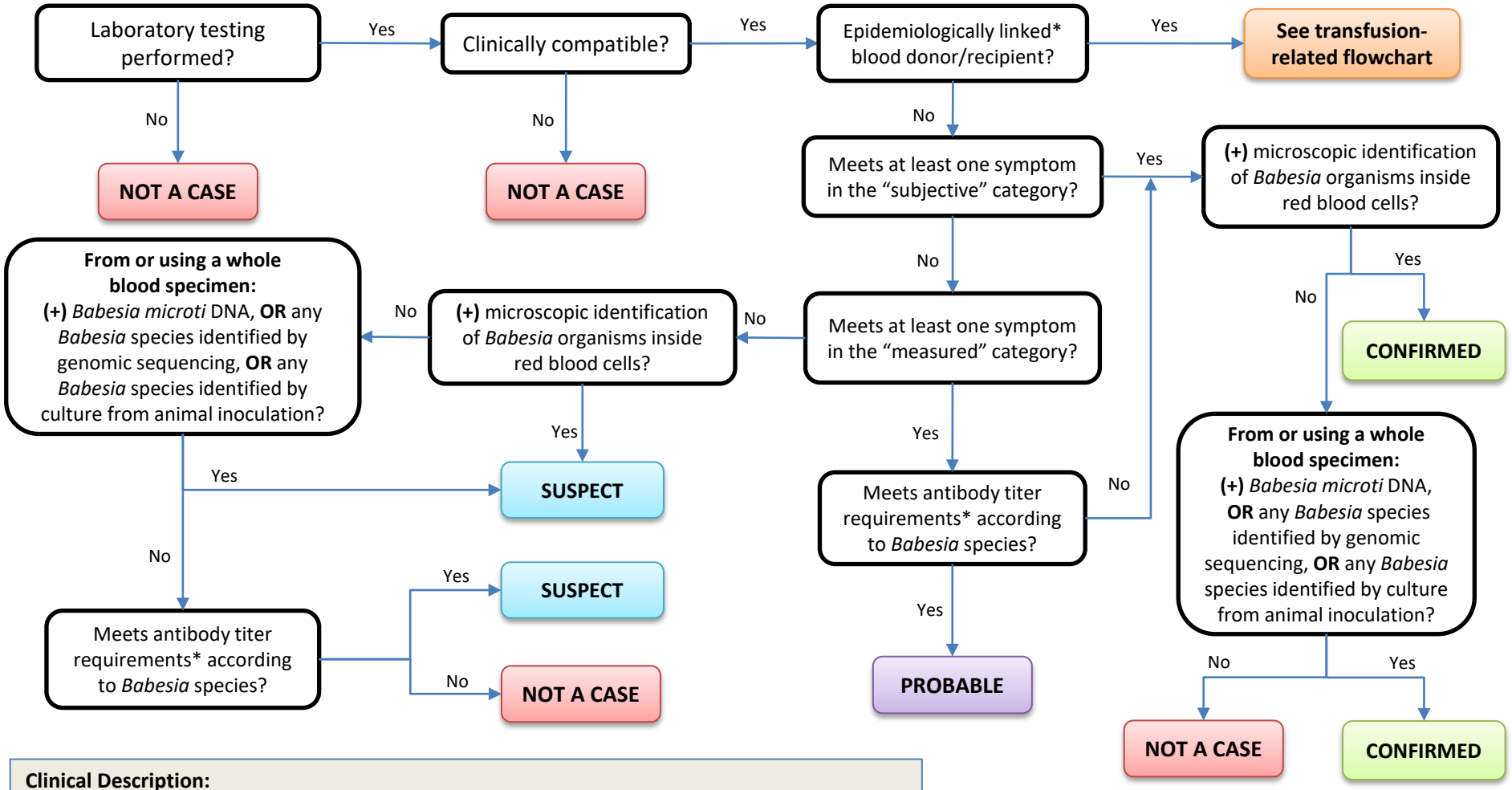
Babesiosis (*Babesia* species)

Non-transfusion related

INCLUDES: Babesia species (i.e., *Babesia microti, B. duncani, B. venatorum, B. divergens*-like parasites, and others)



Clinical Description:
A parasitic disease transmitted through the bites of infected ticks or through contaminated blood components from asymptomatic parasitemic donors or, more rarely, transplacentally. Babesia has two clinical criteria categories:

- Measured: Fever, anemia, or low platelet count
- Subjective: Chills, sweats, headache, myalgia, or arthralgia

*** See Final Flowchart Reference Page for description of antibody titer requirements and epidemiologic links**

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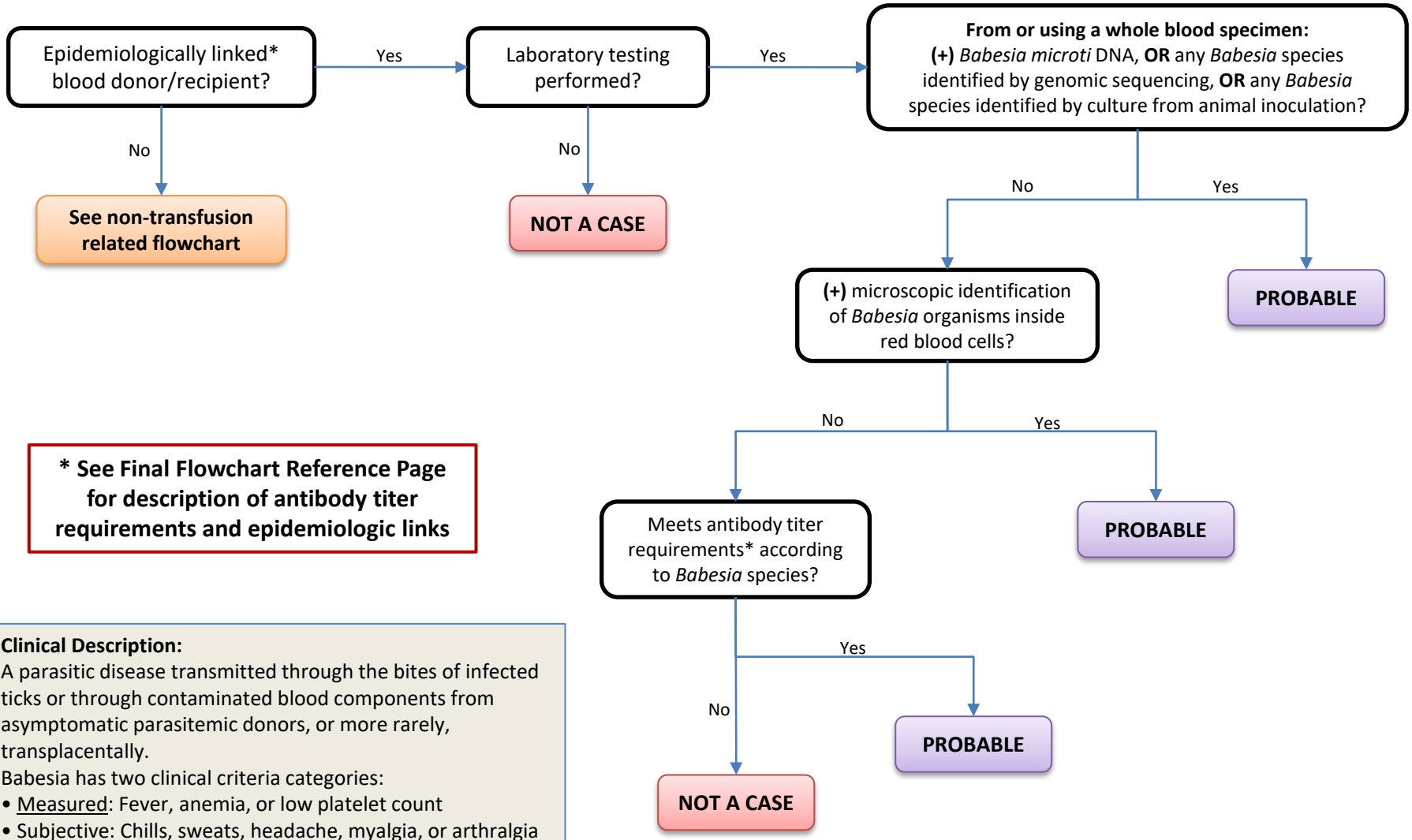

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Babesia species: Epidemiologic Linkage, Species Titer Requirements, Critical Reporting Elements, and Comments

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Antibody titer testing requirement depends on the species of *Babesia*.

Babesia microti

- Positive total antibody or positive IgG antibody titer greater than or equal to 1:256 by IFA, or
- In an epidemiologically linked blood donor/recipient, a positive total antibody or positive IgG antibody titer greater than or equal to 1:64 by IFA, or
- *Babesia microti* positive IgG antibody by immunoblot (e.g., Western Blot)

Babesia divergens

- Positive total antibody or positive IgG antibody titer greater than or equal to 1:256 by IFA

Babesia duncani

- Positive total antibody or positive IgG antibody titer greater than or equal to 1:512 by IFA

Epidemiologic linkage between a blood transfusion recipient and donor is demonstrated if all the below criteria are met:

In the transfusion recipient, all the following:

- Received one or more red blood cell (RBC) or platelet transfusions within 1 year before the collection date of a specimen with laboratory evidence of Babesia infection, and
- At least one of these transfused blood components was donated by the donor described below, and
- Transfusion-associated infection is considered at least as plausible as tick-borne transmission.

In the blood donor, all the following:

- Donated at least one of the RBC or platelet components that was transfused into the above recipient, and
- The plausibility that this blood component was the source of infection in the recipient is considered equal to or greater than that of blood from other involved donors (more than one plausible donor may be linked to the same recipient).

Critical Reporting Elements and Comments:

- Document potential occupational/high-risk exposure during the incubation period (1–3 weeks for tick-borne disease transmission and >1 year for transfusion-associated transmission cases). High exposure activities include but are not limited to outdoor activity, camping, hunting, field exercise, mission/duty related, etc.
- Document if the source is tick-borne or transfusion-associated.
- Document the circumstances under which the case patient was exposed including duty exposure, occupational activities, environmental exposures, or other high-risk activities.