Table 3-2. US Centers for Disease Control and Prevention (CDC) and Council of State and Territorial Epidemiologists (CSTE) case definition for acute hepatitis B, 2024

Criteria Type	Criteria
Age	• >24 months of age, OR
	• ≤24 months of age and the mode of exposure was not perinatal
Clinical	An acute onset or new detection of at least one of the following:
	 Provider report of jaundice
	◦ Peak elevated total bilirubin levels ≥ 3.0 mg/dL
	 Peak elevated serum alanine aminotransferase (ALT) > 200 IU/L, AND
	• The absence of a more likely, alternative diagnosis (which may include evidence of acute liver disease due to other causes or advanced liver disease due to hepatitis B reactivation, pre-existing chronic hepatitis B, or other causes including alcohol exposure, other viral hepatitis, hemochromatosis, etc.)
Confirmatory	<u>Tier 1</u>
Laboratory*	• Detection of Immunoglobulin M (IgM) antibody to hepatitis B core antigen (anti-HBc IgM) AND detection of at least one of the following:
	Hepatitis B surface antigen (HBsAg [†])
	• Hepatitis B e antigen (HBeAg)
	Nucleic acid test (NAT) for HBV DNA (including qualitative, quantitative, or genotype testing) OR
	 Detection of HBsAg⁺, HBeAg, or NAT for HBV DNA within 12 months (365 days) of a negative HBsAg test result (i.e., HBsAg seroconversion)
	<u>Tier 2</u>
	• Results not available or not done for anti-HBc IgM AND detection of at least one of the following:
	• $HBsAg^{\dagger}$
	NAT for HBV DNA
Presumptive Laboratory*	Detection of anti-HBc IgM AND negative or not done for HBsAg ⁺ , HBeAg, or NAT for HBV DNA
Case Status	Classification
Confirmed Acute*	• >24 months of age $OR \le 24$ months of age and the mode of exposure was not perinatal, AND
	• Not known to have a history of acute or chronic hepatitis B, AND
	• Has Tier 1 confirmatory laboratory evidence OR meets the clinical criteria and Has Tier 2 confirmatory laboratory evidence
Probable Acute*	 >24 months of age OR ≤24 months of age and the mode of exposure was not perinatal, AND
	Not known to have a history of acute or chronic hepatitis B, AND
	Meets the clinical criteria and has presumptive laboratory evidence

*Surveillance programs should provide prevention programs with information on people who have positive test outcomes for post-test counseling and referral to treatment and care, as appropriate.

⁺If information on HBsAg test method is available and HBsAg confirmatory neutralization was performed as recommended, HBsAg positive by confirmatory neutralization.