

Table 31–1. CDC AIDS case definition for surveillance of adults and adolescents.

Definitive AIDS diagnoses (with or without laboratory evidence of HIV infection)

1. Candidiasis of the esophagus, trachea, bronchi, or lungs.
2. Cryptococcosis, extrapulmonary.
3. Cryptosporidiosis with diarrhea persisting > 1 month.
4. Cytomegalovirus disease of an organ other than liver, spleen, or lymph nodes.
5. Herpes simplex virus infection causing a mucocutaneous ulcer that persists longer than 1 month; or bronchitis, pneumonitis, or esophagitis of any duration.
6. Kaposi sarcoma in a patient < 60 years of age.
7. Lymphoma of the brain (primary) in a patient < 60 years of age.
8. *Mycobacterium avium* complex or *Mycobacterium kansasii* disease, disseminated (at a site other than or in addition to lungs, skin, or cervical or hilar lymph nodes).
9. *Pneumocystis jiroveci* pneumonia.
10. Progressive multifocal leukoencephalopathy.
11. Toxoplasmosis of the brain.

Definitive AIDS diagnoses (with laboratory evidence of HIV infection)

1. Coccidioidomycosis, disseminated (at a site other than or in addition to lungs or cervical or hilar lymph nodes).
2. HIV encephalopathy.
3. Histoplasmosis, disseminated (at a site other than or in addition to lungs or cervical or hilar lymph nodes).
4. Isosporiasis with diarrhea persisting > 1 month.
5. Kaposi sarcoma at any age.

6. Lymphoma of the brain (primary) at any age.
7. Other non-Hodgkin lymphoma of B cell or unknown immunologic phenotype.
8. Any mycobacterial disease caused by mycobacteria other than *Mycobacterium tuberculosis*, disseminated (at a site other than or in addition to lungs, skin, or cervical or hilar lymph nodes).
9. Disease caused by extrapulmonary *M tuberculosis*.
10. *Salmonella* (nontyphoid) septicemia, recurrent.
11. HIV wasting syndrome.
12. CD4 lymphocyte count below 200 cells/mcL or a CD4 lymphocyte percentage below 14%.
13. Pulmonary tuberculosis.
14. Recurrent pneumonia.
15. Invasive cervical cancer.

Presumptive AIDS diagnoses (with laboratory evidence of HIV infection)

1. Candidiasis of esophagus:
 - (a) recent onset of retrosternal pain on swallowing; and
 - (b) oral candidiasis.
2. Cytomegalovirus retinitis. A characteristic appearance on serial ophthalmoscopic examinations.
3. Mycobacteriosis. Specimen from stool or normally sterile body fluids or tissue from a site other than lungs, skin, or cervical or hilar lymph nodes, showing acid-fast bacilli of a species not identified by culture.
4. Kaposi sarcoma. Erythematous or violaceous plaquelike lesion on skin or mucous membrane.
5. *Pneumocystis jiroveci* pneumonia:
 - (a) a history of dyspnea on exertion or nonproductive cough of recent onset (within the past 3 months); and
 - (b) chest x-ray evidence of diffuse bilateral interstitial infiltrates or gallium scan evidence of diffuse bilateral pulmonary disease; and

- (c) arterial blood gas analysis showing an arterial oxygen partial pressure of < 70 mm Hg or a low respiratory diffusing capacity of $< 80\%$ of predicted values or an increase in the alveolar-arterial oxygen tension gradient; and
- (d) no evidence of a bacterial pneumonia.

6. Toxoplasmosis of the brain:

- (a) recent onset of a focal neurologic abnormality consistent with intracranial disease or a reduced level of consciousness; and
- (b) brain imaging evidence of a lesion having a mass effect or the radiographic appearance of which is enhanced by injection of contrast medium; and
- (c) serum antibody to toxoplasmosis or successful response to therapy for toxoplasmosis.

7. Recurrent pneumonia:

- (a) more than one episode in a 1-year period; and
- (b) acute pneumonia (new symptoms, signs, or radiologic evidence not present earlier) diagnosed on clinical or radiologic grounds by the patient's physician.

8. Pulmonary tuberculosis:

- (a) apical or miliary infiltrates and
- (b) radiographic and clinical response to antituberculous therapy.