Botulism, Foodborne Case Classification Flow Chart
December 2013 – based on 2011 CSTE Case Definition

Are there positive laboratory results?

No

Does the patient meet the clinical description?²?

Yes

Is there an epi link?²?

Yes

Did the patient eat the same food as persons who have laboratory-confirmed botulism?

Yes

Confirmed Case⁴

No

Not a Case³

No

Not a Case³

Yes

Confirmed Case⁴

Are the lab results an isolation of Clostridium botulinum from stool?

Yes

Does the patient meet the clinical description?²?

Yes

Confirmed Case⁴

No

Not a Case³

No

Not a Case³

Was the botulinum toxin detected in serum, stool, or the patient's food?

Yes

Does the patient meet the clinical description?²?

Yes

Confirmed Case⁴

No

Not a Case³

No

Not a Case³

Probable Case⁴

Not a Case³

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Botulism, Foodborne (*Clostridium botulinum*)

1. **Clinical Definition:** Ingestion of botulinum toxin results in an illness of variable severity. Common symptoms are diplopia, blurred vision, and bulbar weakness. Symmetric paralysis may progress rapidly.

2. **Epidemiological Link:** e.g., ingestion of a home-canned food within the previous 48 hours

3. **Not a Case:** Note there are four different subtypes of Botulism (foodborne, infant, wound, and other). Check all case classifications before ruling as “not a case” of botulism.

4. **Confirmed/Probable Case:** Open a Preliminary Outbreak Report, if not already done, as one case of botulism is considered an outbreak.