

COVID-19-Associated Pediatric Mortality Case Definition

Clinical Description

A confirmed COVID-19-associated death is defined for surveillance purposes as a death resulting from a clinically compatible illness that was confirmed to be COVID-19 by an appropriate laboratory or rapid diagnostic test. For confirmed deaths, there should be no period of complete recovery between the illness and death. COVID-19-associated deaths in all persons aged <18 years should be reported.

A death should **not** be reported if:

1. There is no laboratory confirmation of SARS-CoV-2 infection.
2. The COVID-19 illness is followed by full recovery to baseline health status prior to death.
3. The death occurs in a person 18 years or older.
4. After review and consultation there is an alternative agreed upon cause of death.

Laboratory Criteria for Diagnosis

Laboratory testing for SARS-CoV-2 infection may be done on pre- or post-mortem clinical specimens, and include identification of SARS-CoV-2 infections by a positive result by at least one of the following:

1. Detection of SARS-CoV-2 ribonucleic acid (RNA) in a clinical or post-mortem specimen using a diagnostic molecular amplification test performed by a Clinical Laboratory Improvement Amendments (CLIA)-certified provider.
2. Detection of SARS-CoV-2 RNA in a clinical or post-mortem specimen by genomic sequencing.
3. Detection of SARS-CoV-2 specific antigen in a clinical or post-mortem specimen using a diagnostic test performed by a CLIA-certified provider.

Case Classification

Confirmed

A death meeting the clinical definition that is laboratory confirmed.

Suspect

A death that does not meet the confirmed case definition that has a death certificate that indicates "long COVID-19" or equivalent terms as an immediate, underlying, or contributing cause of death.