

DSHS Chagas Disease (*Trypanosoma cruzi*) Exposure Assessment and Testing Guidance Rev. 11-24

Process 1	Process 2		Process 3	
Person exposed or potentially exposed to a triatomine (kissing bug) and the bug or photo of the bug is available for identification	Person tests positive at a blood bank OR Person exposed or potentially exposed to a <i>T. cruzi</i> -positive triatomine bug >8 weeks prior OR Person with onset of cardiac disease compatible		Person exposed or potentially exposed to a <i>T. cruzi</i> -positive triatomine bug ≤8 weeks prior OR Person traveled to a highly Chagas-endemic	
 Email the digital photo(s) to DSHS at <u>the.vet@dshs.texas.gov</u> If bug appears to be a triatomine or no photo is available, send the bug to DSHS for identification and testing (instructions and submission form are available on the DSHS Chagas <u>page</u>). If the bug is not a triatomine, the person is NOT at risk for Chagas disease If the bug tests Positive for <i>T. cruzi</i>, go to 	with chronic Chagas disease OR Person with Chagas-positive mother or sibling OR Person potentially exposed to blood or tissue from an infected person or animal >8 weeks prior (e.g., needlestick injury, tissue transplant)		area and has acute symptoms OR Person potentially exposed to blood or tissue from an infected person or animal ≤8 weeks prior (e.g., needlestick injury, tissue transplant)	
	Perform serology screening at the DSHS lab (uses TWO te that detect antibodies to different antigens) OR a comme lab (see page 2 for lab information).			
 Process 2 or 3, depending on timeframe If the bug tests Negative for <i>T. cruzi</i>, the person is NOT at risk for Chagas disease If the bug appears to be a triatomine, but is not available for testing and you wish to pursue clinical testing, go to Process 2 	Negative Serology Person does NOT have Chagas disease	Positive OR Inconclusive If performed at DSHS lab: T lab will automatically forwa Inconclusive specimens to t further testing provided sat volume is sufficient. Positiv do not need additional test	The DSHS ard the CDC for mple re samples	 Prior to sample submission, consult with Regional DSHS Zoonosis Control staff to 1) determine if PCR testing is warranted, and 2) to discuss other testing options If CDC agrees to test by PCR, submit the appropriate sample to the DSHS lab for routing to CDC
 If the person tests Positive at DSHS OR CDC, visit <u>https://www.cdc.gov/chagas/hcp/clinical-care/index.html</u> for information on Chagas disease evaluation and treatment If the person tests Negative at CDC, the person does NOT have Chagas disease 		If performed at commercial lab: Public health should request that any remaining sample be forwarded to the DSHS lab & notify provider OR the provider can collect a new sample and send to the DSHS lab for follow up testing.		(see page 2 for lab information). If serologic testing (Process 2) or blood smear examination is recommended, the sample should be sent to DSHS or a commercial lab.

Major Laboratories that Currently Perform Trypanosoma cruzi Testing

Texas Department of State Health Services Laboratory

- <u>Trypanosoma cruzi IgG Antibody Immunoassay</u>
- Check Chagas IgG box in Section 6 of G-2A form (Feb 2024)

> <u>ARUP Laboratories</u>

- <u>Trypanosoma cruzi</u> Antibody, IgG
- Test Code 0051076

Quest Diagnostics

- <u>Trypanosoma cruzi</u> Antibody, Total
- Test Code 13230
- Mayo Clinic Laboratories
 - Trypanosoma cruzi Total Antibody, Enzyme-Linked Immunosorbent Assay, Serum

Centers for Disease Control and Prevention

- <u>Chagas Disease Serology</u> and <u>Chagas Disease Molecular Detection</u>
- Chagas serology at CDC is for confirmatory testing only. Samples should be sent to the state public health lab or a commercial lab for initial screening.
- Mark Chagas Disease box in Section 7 of G-2A form (Feb 2024) when requesting Chagas PCR, which requires pre-approval, <u>OR</u> when consultation with public health has shown that CDC serology testing is needed.

Disclaimer of Endorsement: Reference herein to any specific commercial laboratory or test does not necessarily constitute or imply its endorsement, recommendation, or favoring by the Texas Department of State Health Services.