CASE DEFINITION

Paraquat

Clinical description

Ingestion of paraquat typically results in gastrointestinal illness, including oropharyngeal ulcerations, vomiting, and diarrhea, which might contain blood. Patients might have dyspnea and hemoptyis as a result of pulmonary edema or hemorrhage, which can progress to fibrosis over the course of days to weeks (1-3).

Laboratory criteria for diagnosis

- A case in which paraquat in urine, plasma, or serum is detected, as determined by a commercial laboratory -OR-
- Detection of paraquat in environmental samples, as determined by NIOSH or FDA

Case classification

- **Suspected**: A case in which a potentially exposed person is being evaluated by health-care workers or public health officials for poisoning by a particular chemical agent, but no specific credible threat exists.
- **Probable**: A clinically compatible case in which a high index of suspicion (credible threat or patient history regarding location and time) exists for paraquat exposure, or an epidemiologic link exists between this case and a laboratory-confirmed case.
- **Confirmed**: A clinically compatible case in which laboratory tests have confirmed exposure.

The case can be confirmed if laboratory testing was not performed because either a predominant amount of clinical and nonspecific laboratory evidence of a particular chemical was present or a 100% certainty of the etiology of the agent is known.

Additional resources


This document is based on CDC’s best current information. It may be updated as new information becomes available. For more information, visit [www.bt.cdc.gov/chemical](http://www.bt.cdc.gov/chemical), or call CDC at 800-CDC-INFO (English and Spanish) or 888-232-6348 (TTY).