Confirmed Case:
Using an e-cigarette ("vaping") or dabbing* in 90 days prior to symptom onset

**AND**

Pulmonary infiltrate, such as opacities, on plain film chest radiograph or ground-glass opacities on chest CT

**AND**

Absence of pulmonary infection on initial work-up. Minimum criteria are:
1. A negative respiratory viral panel

**AND**

2. A negative influenza PCR or rapid test, if local epidemiology supports influenza testing

**AND**

All other clinically-indicated respiratory infectious disease testing (e.g., urine Antigen for Streptococcus pneumoniae and Legionella, sputum culture if productive cough, bronchoalveolar lavage (BAL) culture if done, blood culture, HIV-related opportunistic respiratory infections if appropriate) are negative

**AND**

No evidence in medical record of alternative plausible diagnoses (e.g., cardiac, rheumatologic, or neoplastic process).

Probable Case:
Using an e-cigarette ("vaping") or dabbing* in 90 days prior to symptom onset

**AND**

Pulmonary infiltrate, such as opacities, on plain film chest radiograph or ground-glass opacities on chest CT

**AND**

Infection identified via culture or PCR, but clinical team** believes this infection is not the sole cause of the underlying lung injury OR minimum criteria to rule out pulmonary infection not met (testing not performed) and clinical team** believes infection is not the sole cause of the underlying lung injury

**AND**

No evidence in medical record of alternative plausible diagnoses (e.g., cardiac, rheumatologic, or neoplastic process).
Footnotes

*Using an electronic device (e.g., electronic nicotine delivery system (ENDS), electronic cigarette, e-cigarette, vaporizer, vape(s), vape pen, dab pen, or other device) or dabbing to inhale substances (e.g., nicotine, marijuana, THC, THC concentrates, CBD, synthetic cannabinoids, flavorings, or other substances).

**Clinical team caring for the patient.

Notes: these case definitions are meant for surveillance and not clinical diagnosis. These case definitions are subject to change and will be updated as additional information becomes available if needed.

For more information visit CDC’s Lung Injury response website: www.cdc.gov/lunginjury.