**Process for developing and reviewing PHLN’s laboratory case definitions**

This document contains the process for developing and reviewing PHLN’s laboratory case definitions.

**Authorisation:**  PHLN

**Consensus date:**  25 June 2018

1. The Public Health Laboratory Network (PHLN) is required to conduct a review of Laboratory Case Definitions (LCDs) under the following circumstances:
   1. as the need arises – routine reviews for LCDs are to be nominated as part of the ‘Review of LCDs’ standing item, discussed at each PHLN Teleconference;
      1. PHLN aims to review LCDs every three years, to ensure alignment to current laboratory best practice. LCDs reviewed more than three years ago will be considered as “high priority” for review.
   2. if a Series of National Guidelines (SoNG) document is nominated for review by Communicable Diseases Network Australia (CDNA) – *There is a laboratory component in the Surveillance Case Definition (SCD) which is included in the SoNG*;
   3. if an SCD is nominated for review by CDNA or the Case Definitions Working Group (CDWG) – *a laboratory component is included in the SCD which should be consistent with the LCD*;
   4. exceptional circumstances – such as a rapid response to emerging infectious disease threats (e.g. MERS-CoV or Ebola virus disease).
2. PHLN has identified “custodians”, who are tasked with leading the development or revision of the LCDs. The LCD Custodian may seek an author from within their own or other organisations to research and write the revisions; however the Custodian is ultimately responsible for the coordination and delivery of the final LCD.
3. The LCD Custodian and/or nominated LCD Author will:
   1. identify changes to be made to the LCD in line with the rationale for review;
   2. ensure alignment with the surveillance case definition or identify reasoning for discrepancies for discussion;
   3. consult with the CDWG representative on PHLN;
   4. consider other guidance and literature including the CDNA SoNG (if any) and international case definitions;
   5. note the proposed changes and provide an explanation and evidence to be discussed either as an Out of Session item to PHLN, or as part of the monthly teleconference; and
   6. submit the LCD to PHLN via the secretariat for distribution.
4. The LCD should be considered by PHLN, either in a meeting or out of session.
5. PHLN members should consult within their jurisdictions and organisations as well as with any other expert groups that are relevant to the disease.
6. The Custodian will incorporate comments and feedback from PHLN into revised drafts until the new or revised LCD is ENDORSED by PHLN.
7. Once endorsed by PHLN, the LCD should be provided to CDWG for their consideration.
   1. The consultation period will be approximately two weeks.
8. Collated comments from CDWG will be presented at the next PHLN teleconference, where additions or amendments will be re-considered by PHLN.
9. Once the LCD is endorsed by PHLN, the PHLN Secretariat will arrange to publish it on the Department of Health website. Once published online, the Secretariat will notify PHLN, NSC, CDWG and CDNA through their respective Secretariats.
10. The Secretariat will keep a record of the review of any LCDs, as well as the assigned custodian and author, for future reference.