Table. Pathogen testing in patient with undifferentiated severe sepsis, Minnesota, USA, 2014*

Pathogen tested	Serum sample	
	Acute phase	Convalescent phase
HIV-1/-2	Ag/Ab screen negative	
Leptospira	IgM/IgG negative	
Cryptococcus	Antigen screen negative	
Anaplasma phagocytophilum	IgG <1:64, PCR negative	
Ehrlichia chaffeensis	IgG <1:64, PCR negative	
Ehrlichia ewingii/canis	PCR negative	
Ehrlichia muris–like	PCR negative	
Borrelia burgdorferi	Ab screen negative	Ab screen negative
Babesia microti	IgG <1:64, PCR negative	
Babesia duncani	PCR negative	
Babesia divergens strain MO-1	PCR negative	
West Nile virus	IgM/IgG and PCR negative	IgM/IgG negative
Eastern equine encephalitis virus	IgM/IgG <1:10	IgM/IgG <1:10
Western equine encephalitis virus	IgM/IgG <1:10	IgM/IgG <1:10
St. Louis encephalitis virus	IgM/IgG <1:10	IgM/IgG <1:10
California serogroup virus	IgM ≥1:10,† IgG 1:10	IgM 1:80, IgG 1:320
Powassan/tick-borne encephalitis virus‡	IgM negative	
La Crosse virus‡	IgM negative, PRNT <10	PRNT 320
Jamestown Canyon virus‡	IgM negative, PRNT 160	PRNT 10,240

*Positive control value for PRNT testing was >1,280. Ag, antigen; Ab, antibody, Ig, immunoglobulin, PRNT, plaque reduction neutralization testing.
†Additional dilution of result not performed.
‡Testing performed at the Arboviral Diseases Branch Laboratory, Centers for Disease Control and Prevention, Fort Collins, Colorado, USA.

nonspecific mild febrile illness, or severe neuroinvasive disease (*4*,*7*,*10*). This case illustrates a suspected JCV infection causing undifferentiated severe sepsis, which has not, to our knowledge, been previously reported. Initial suspicion for acute neuroinvasive disease was low, and neurologic imaging and cerebrospinal fluid sampling were not performed. We recommend that testing for CAL (and specifically for JCV) infection should be strongly considered in the setting of severe sepsis in adults with substantial exposure to mosquitoes and no other identifiable source of sepsis.

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Correction: Vol. 21, No. 7

An additional case report publication was found after publication of Disseminated Infections with Talaromyces marneffei in Non-AIDS Patients Given Monoclonal Antibodies against CD20 and Kinase Inhibitors (J.F.W. Chan al.). An addendum and reference have been added to the article online (http://wwwnc.cdc.gov/eid/article/21/7/15-0138_article).