

BASICS

Initial impetus for investigation citizen complaint ICP/clinician surveillance blip seen by OHD CDC nursing home staff surveillance blip seen by LHD other state HD school report

1st notification to LHD

1st notification to OHD

investigation start date

Location of exposure(s) multi-county outside U.S. multi-state single county

County of exposure(s)

City* * where applicable

Location/facility name*

Contact info for group, facility, etc.

Brief overview

Earliest exposure latest exposure

Syndrome
 gastroenteritis
 pertussis
 respiratory
 hepatitis
 varicella
 other

Suspected primary route of transmission
 foodborne
 waterborne
 person-to-person
 indeterminate
 other

Suspected secondary route of transmission (if any)
 foodborne
 waterborne
 person-to-person
 indeterminate
 other

Setting(s) of exposure (check all that apply)
 unknown camp
 private home office/worksite
 community-wide grocery store
 restaurant/deli hospital
 meeting/convention workplace cafeteria
 reception facility nursing home/LTC/ALC
 DCC prison, jail
 school picnic
 religious facility fair/festival/mobile

Were specimens of any kind tested anywhere? Y N Were incubation periods determined? Y N **ETIOLOGY**

Was the etiologic agent lab-confirmed? Y N If no, presumptively identified? (NB: this requires incubation periods.) Y N

Confirmed (or presumptive) bug/disease

PFGE pattern/other Bug first identified at which lab? private OSPHL other PHL CDC Other...

Sources of positive specimens cases food environment food handler

From how many persons were specimens tested? Count people, not specimens.

From how many persons were stool specimens tested? Count people, not specimens.

How many non-fecal specimens were tested at the PHL?

Overall, how many cases were lab-confirmed?

How many food samples were tested? water? other environmental samples?

How many of the following kinds of specimens were tested? Use estimates if necessary.

	bacterial cx	O & P	Norwalk	estimates (only if necessary)
at private labs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> some (# unknown) <input type="checkbox"/> none <input type="checkbox"/> no idea
at the PHL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> some (# unknown) <input type="checkbox"/> none <input type="checkbox"/> no idea

What was the median lag time from onset of D or V to collection of specimens tested at the PHL?
 enter exact time if known within 3 days within 2 weeks
 could not be determined within 1 week more than 2 weeks

If no etiology was established through basic tests, what other lab work was done? none toxin screens other PCR other culture referral to CDC

If neither confirmed nor presumptive, was this at least compatible with Norwalk-like illness? Y N

CASES

Was a formal case definition used? Y N

If yes, specify

Earliest known onset date latest

Confirmed case count including secondary cases

Presumptive case count including secondary cases

Suspect case count (typically, sick people who don't meet the case definition)

Extrapolated total ill Skip this unless you have a sample from which you can realistically extrapolate.

Do these tallies include any non-Oregon residents? If yes, provide details:

How many symptom profiles were systematically collected from confirmed and presumptive cases?

Of those, how many had...	AGE		SEX		min			median	max	hours/days
cramps	<input type="text"/>	infants <input type="text"/>	female	<input type="text"/>	incubation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> H <input type="radio"/> D
vomiting	<input type="text"/>	1-4 <input type="text"/>	male	<input type="text"/>	duration	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> H <input type="radio"/> D
fever	<input type="text"/>	5-19 <input type="text"/>	unknown	<input type="text"/>						
any diarrhea	<input type="text"/>	20-49 <input type="text"/>	total	<input type="text"/>						
3+ diarrhea in 24 h	<input type="text"/>	50+ <input type="text"/>								
bloody stools	<input type="text"/>	unknown <input type="text"/>								
		total <input type="text"/>								

SEVERITY

saw clinician

admitted to hospital not ER visits

died

OB#

Name:

Non-Food GI Outbreak Summary

OHD lead

other OHD

LHD lead(s)

others

Which agencies were substantively involved?

1 LHD

multiple LHDs

State HD (Oregon)

ODA

other state HDs

CDC

FDA

METHODS

Who designed the investigation?

LHD sanitarians

LHD CD nurses

OHD epidemiologist(s)

others with advanced epi skills

Was information collection delegated to non-public health people (e.g., ICPs, school nurses, nursing home staff)? Y N

What methods were used to investigate this outbreak?

- active case finding
- case interviews
- chart/record review
- case-control study
- cohort study
- food prep review
- food cultures
- product traceback
- factory investigation
- source investigation
- environmental cultures

How many well persons (controls) were systematically interviewed?

How were controls selected?

- well cohort members
- meal companions
- phone # match
- friends
- other

What best describes the sources of information used (e.g., who was interviewed)?

- group spokesman
- entire cohort
- sick people
- convenience sample of well persons
- random sample of enumerated cohort

Other outbreak-related activities

- product recall
- press release
- media coverage
- out-of-office travel by LHD
- out-of-office travel by OHD
- overnight travel by OHD
- meeting abstract
- publication

What additional records are available? questionnaire written report computer files epi curve

QA

Please check your work before submitting the report!

- Q1 Are the incubation periods of your cases consistent with the bug? Typically, outliers should be excluded—at least as primary cases.
- Q2 Do the various case tallies add up consistently (e.g., number of cases, sex and age breakdowns, etc.)?
- Q3 For named reportable diseases (e.g., O157), were case investigation forms filed for every in-state confirmed and presumptive case?
- Q4 Were the summary and any final reports exchanged between OHD and LHD staff?
- Q5 Have hard copies of any questionnaires, reports, etc., been filed in the OHD archives?
- Q6 Have electronic copies been put in the appropriate folder on the OHD shared directory?
- Q7 Are all sections of this report complete?

Attach or e-mail any stand-alone reports. Write in comments as necessary.

NARRATIVE