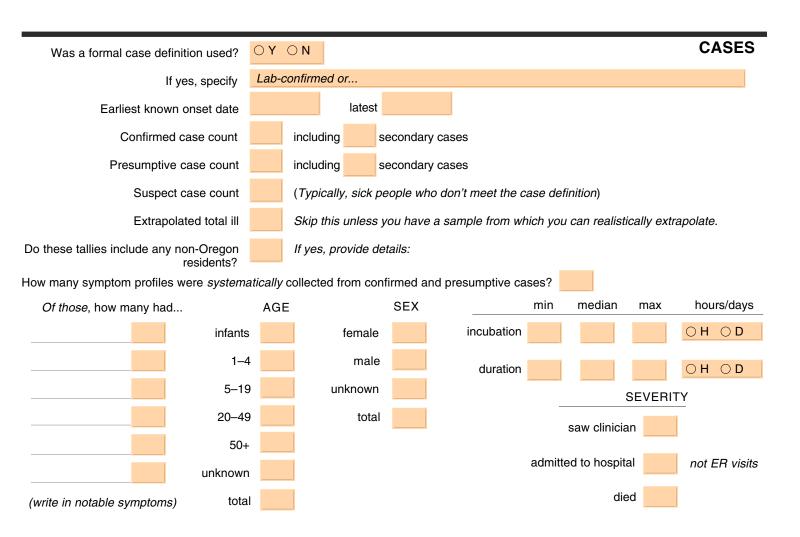
OB#	Name:			Non-GI	Outbreak Summary		
		☐ ICP/clinician ☐ surveillance blip s		veillance blip seen by OHE er state HD	BASICS school report		
1st notification to LHD			Syndrome	Suspected primary route of transmission	Suspected secondary routes (if any)		
1st notification to OHD			☐ gastroenteritis ☐ pertussis	☐ foodborne ☐ waterborne	☐ foodborne ☐ waterborne		
investigation start date Location of exposure(s		☐ outside U.S. ☐ single county	☐ respiratory ☐ hepatitis ☐ varicella ☐ other	□ person-to-person□ respiratory□ animal contact	□ person-to-person□ respiratory□ animal contact		
County of exposure(s)				☐ indeterminate ☐ unknown	☐ indeterminate☐ unknown		
City*		* where applica	ble	□ other	□ other		
Location/facility name*				Catting (a) of average up	(abaak all that amak à		
Contact info for group, facility, etc.				☐ unknown ☐ private home ☐ community-wide ☐ restaurant/deli	□ private home □ office/worksite □ community-wide □ grocery store		
Brief overview				☐ reception facility ☐ DCC			
Earliest exposure		latest exposure		☐ religious facility	☐ fair/festival/mobile		
Were specimens of any k	ind tested anyw	here? OY ON	Were incubation p	eriods determined?	Y ON ETIOLOGY		
Was the etiologic agent la	lb-confirmed?	OY ON If no	, presumptively ider	ntified?			
Confirmed (or presumptive	e) bug/disease						
PFGE pattern/other		Bug first identific	ed at which lab?	private 🗌 OSPHL 🗌 ot	her PHL 🗌 CDC 🔲 Other		
Sources of positive specin	mens cases	s 🗌 food 🗌 enviro	onment	undler			
From how many persons	were specimen	s tested?	Count people,	not specimens.			
How many non-fecal spec	cimens were tes	sted at the PHL?					
Overall, how many cases	were lab-confir	med?					
What specimen(s) tested	positive?	stool vomitus bl	ood 🗌 urine 🔲 thro	at ☐ food ☐ water			
If no etiology was establis what other lab work was o		sic tests, none	☐ toxin screens ☐	other PCR other cultu	re referral to CDC		

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OB#		Name:		No	n-GI Ou	tbreak Summary			
Was in people What r investi acti cas cha cas coh	OHD ad(s) thers formation collection of	to How many well persons (controls were systematically interviewed? How were controls selected? meal complete.		ons 🗌 other	Other of production out-of overning course.	METHODS signed the investigation? sanitarians CD nurses epidemiologist(s) rs with advanced epi skills utbreak-related activities uct recall s release a coverage of-office travel by LHD of-office travel by OHD night travel by OHD ting abstract cation			
☐ food cultures ☐ product traceback ☐ factory investigation ☐ source investigation ☐ environmental cultures		sources of information used (e.g., who was interviewed)?	☐ entire cohort ☐ sick people ☐ convenience sample of well persons ☐ random sample of enumerated cohort						
	dditional records are		written report	computer files epi c	eurve	QA			
	•	ore submitting the report!	t with the bug? Tvr	pically, outliers should be	excluded—a	at least as primary cases.			
□ 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?								
	·		loider on the OHD	snared directory?					
()7	Are all sections of the	nie ranort complata?							

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

NARRATIVE

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