Fax completed form to DOH
Communicable Disease
Epidemiology
Fax: 206-418-5515

Outbreak Reporting Form – Food

Disease

REPORTING AGENCY INFORMATION

Local health jurisdiction (LHJ) __________________________
Contact person ________________________________________
Contact person phone (___) ____ - ________
Lead agency ________________________________________
Initial LHJ notification date & time ___/___/____  am/pm
Notified by: ____________________________
Investigation start date & time ___/___/____ _______ am/pm
Investigation completion date ___/___/____

INVESTIGATION METHODS (check all that apply)

☐ Interviews only of ill persons
☐ Case-control study
☐ Cohort study
☐ Food preparation review
☐ Water system assessment: Drinking water
☐ Water system assessment: Nonpotable water
☐ Treated or untreated recreational water venue assessment
☐ Investigation at factory/production/treatment plant
☐ Investigation at original source (e.g., farm, water source, etc.)
☐ Food product or bottled water traceback
☐ Environment/food/water sample testing
☐ Other ____________________________

If applicable, attach further information about investigative activities and tools (e.g. epidemic curves, questionnaires, case definitions)

Comments

DATES (mm/dd/yyyy)

Date first case became ill: ___/___/_____  Date last case became ill: ___/___/_____
Date of initial exposure: ___/___/_____  Date of last exposure: ___/___/_____

GEOGRAPHIC LOCATION

Place of Exposure (e.g., Name & City of restaurant): _________________________________________________________________
County of exposure: _____________________ or ☐ Exposure occurred in multiple counties, please list: _______________________
County of cases’ residence: _____________________ or ☐ Cases resided in multiple counties, please list: _______________________

PRIMARY CASES

Number of Primary Cases

<table>
<thead>
<tr>
<th># Lab-confirmed cases</th>
<th>Male</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td># Probable cases</td>
<td>Female</td>
<td>%</td>
</tr>
<tr>
<td># Estimated total primary ill</td>
<td>%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th># cases</th>
<th>Total # for whom info is available</th>
<th>Approx % of primary cases by age</th>
</tr>
</thead>
<tbody>
<tr>
<td># Died</td>
<td>&lt;1 yr</td>
<td>%</td>
</tr>
<tr>
<td># Hospitalized</td>
<td>1-4 yrs</td>
<td>%</td>
</tr>
<tr>
<td># Visited emergency room</td>
<td>5-9 yrs</td>
<td>%</td>
</tr>
<tr>
<td># Visited health care provider (excluding ER visits)</td>
<td>10-19 yrs</td>
<td>%</td>
</tr>
</tbody>
</table>

INCUBATION PERIOD (PRIMARY CASES ONLY)

<table>
<thead>
<tr>
<th>Shortest</th>
<th>Min, Hours, Days</th>
<th>Median</th>
<th>Min, Hours, Days</th>
<th>Longest</th>
<th>Min, Hours, Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of cases or whom info available</td>
<td>Total # of cases or whom info available</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

☐ Unknown incubation period  ☐ Unknown duration of illness

Last revised 03/2014   DOH #420-022
## SIGNS OR SYMPTOMS (PRIMARY CASES ONLY)

<table>
<thead>
<tr>
<th>Feature</th>
<th># cases with signs or symptoms</th>
<th>Total # cases for whom info available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vomiting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diarrhea</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bloody stools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fever</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abdominal cramps</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HUS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asymptomatic</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## SECONDARY CASES

<table>
<thead>
<tr>
<th>Mode of secondary transmission (check all that apply)</th>
<th>Number of secondary cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Food</td>
<td>[ ] # Lab-confirmed secondary cases</td>
</tr>
<tr>
<td>[ ] Water</td>
<td>[ ] # Probable secondary cases</td>
</tr>
<tr>
<td>[ ] Animal contact</td>
<td>[ ] Total # secondary cases</td>
</tr>
<tr>
<td>[ ] Person-to-person</td>
<td>[ ] Total # cases (Primary + Secondary)</td>
</tr>
<tr>
<td>[ ] Environmental contamination other than food/water</td>
<td></td>
</tr>
<tr>
<td>[ ] Indeterminate/Other/Unknown</td>
<td></td>
</tr>
</tbody>
</table>

## TOTAL CASES (PRIMARY AND SECONDARY):

## LABORATORY

Is the etiologic agent laboratory confirmed?  [ ] Yes  [ ] No

If etiology is not laboratory confirmed, were patient specimens collected?  [ ] Yes, # collected _____  [ ] No

<table>
<thead>
<tr>
<th>Genus</th>
<th>Species</th>
<th>Serotype</th>
<th>Confirmed outbreak etiology</th>
<th>Other characteristics</th>
<th>Detected in*</th>
<th># Lab-confirmed cases</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Detected in (choose all that apply) 1 – patient specimen  2 – food specimen  3 – environment specimen  4 – food worker specimen

## DOH USE ONLY:

### FOOD-SPECIFIC DATA

[ ] Food vehicle undetermined  Total # of cases exposed to implicated food _____

### Food

<table>
<thead>
<tr>
<th>Food 1</th>
<th>Food 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of food (excluding any preparation)</td>
<td></td>
</tr>
<tr>
<td>Reason(s) suspected* (choose all that apply)</td>
<td></td>
</tr>
<tr>
<td>Method of processing* (choose all that apply)</td>
<td></td>
</tr>
<tr>
<td>Method of preparation* (choose one)</td>
<td></td>
</tr>
<tr>
<td>Level of preparation* (choose one)</td>
<td></td>
</tr>
</tbody>
</table>

*See list below for options

**Reason(s) suspected:**

1 – Statistical evidence from epidemiological investigation
2 – Laboratory evidence (e.g., identification of agent in food)
3 – Compelling supportive information
4 – Other data (e.g., same phage type found on farm that supplied eggs)
5 – Specific evidence lacking but prior experience makes it likely source

**Method of processing (Prior to point-of-service: Processor):**

P1 – Pasteurized (e.g., liquid milk, cheese, and juice etc.)
P2 – Unpasteurized (e.g., liquid milk, cheese, and juice etc.)
P3 – Shredded or diced produce
P4 – Pre-packaged (e.g., bagged lettuce or other produce)
P5 – Irradiation
P6 – Pre-washed
P7 – Frozen
P8 – Canned
P9 – Acid treatment (e.g., commercial potato salad with vinegar, etc.)
P10 – None/ Unknown

**Method of Preparation (At point-of-service: Retail: restaurant, food store):**

R1 – Prepared in the home
R2 – Ready to eat food: No manual preparation, No cook step (e.g., sliced cheese, pre-packaged deli meats: whole raw fruits; raw oysters, bottled juice, etc.)
R3 – Ready to eat food: Manual preparation, No cook step (e.g., fresh vegetables, cut fresh fruits, chicken salad made from canned chicken, reconstituted juice, etc.)
R4 – Cook and Serve Foods: Immediate service (e.g., soft-cooked eggs, hamburgers, etc.)
R5 – Cook and hot hold prior to service. (e.g., fried chicken, soups, hot vegetables, hot dogs, mashed potatoes, etc.)
R6 – Advance preparation: Cook, cool, serve (e.g., sliced roast beef from a whole cooked roast, etc.)
R7 – Advance preparation: Cook, cool, reheat, serve (e.g., lasagna, casseroles, soups, gravies, sauces, chill, etc.)
R8 – Advance preparation: Cook, cool, reheat, hot hold, serve (e.g., chill, reheat beans, etc.)
R9 – Advance preparation: Cook-chill and Reduced Oxygen Packaging (ROP) (e.g., sauces, gravies, cheeses, etc. packaged under ROP)
R10 – None/ Unknown

**Level of preparation:**

1 – Foods eaten raw with minimal or no processing. (e.g., washing, cooling)
2 – Foods eaten raw with some processing. (e.g., no cooking, fresh cut and/or packaged raw)
3 – Foods eaten heat processed. (e.g., cooked: a microbiological kill step was involved in processing)
<table>
<thead>
<tr>
<th>Location where food was prepared</th>
<th>Location of exposure (where food was eaten)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Check all that apply)</td>
<td>(Check all that apply)</td>
</tr>
<tr>
<td>□ Restaurant – ‘Fast food’</td>
<td>□ Nursing home, assisted living facility,</td>
</tr>
<tr>
<td>(drive-up service or pay at</td>
<td>home care</td>
</tr>
<tr>
<td>counter)</td>
<td>□ Restaurant – ‘Fast food’</td>
</tr>
<tr>
<td></td>
<td>(drive-up service or pay at counter)</td>
</tr>
<tr>
<td></td>
<td>□ Nursing home, assisted living facility,</td>
</tr>
<tr>
<td></td>
<td>home care</td>
</tr>
<tr>
<td>□ Restaurant – Sit-down dining</td>
<td>□ Hospital</td>
</tr>
<tr>
<td></td>
<td>□ Restaurant – Sit-down dining</td>
</tr>
<tr>
<td></td>
<td>□ Hospital</td>
</tr>
<tr>
<td>□ Restaurant – Other or unknown</td>
<td>□ Child day care center</td>
</tr>
<tr>
<td>type</td>
<td>□ Restaurant – Other or unknown type</td>
</tr>
<tr>
<td></td>
<td>□ Child day care center</td>
</tr>
<tr>
<td>□ Private home</td>
<td>□ School</td>
</tr>
<tr>
<td></td>
<td>□ Private home</td>
</tr>
<tr>
<td>□ Banquet facility (food</td>
<td>□ Prison, jail</td>
</tr>
<tr>
<td>prepared and served on site)</td>
<td>□ Banquet facility (food prepared and served</td>
</tr>
<tr>
<td></td>
<td>on site)</td>
</tr>
<tr>
<td>□ Caterer (food prepared off-site</td>
<td>□ Church, temple, religious location</td>
</tr>
<tr>
<td>from where served)</td>
<td>□ Caterer (food prepared off-site from where</td>
</tr>
<tr>
<td></td>
<td>served)</td>
</tr>
<tr>
<td>□ Fair, festival, other temporary</td>
<td>□ Camp</td>
</tr>
<tr>
<td>or mobile services</td>
<td>□ Fair, festival, other temporary or mobile</td>
</tr>
<tr>
<td></td>
<td>services</td>
</tr>
<tr>
<td>□ Grocery store</td>
<td>□ Camp</td>
</tr>
<tr>
<td></td>
<td>□ Picnic</td>
</tr>
<tr>
<td>□ Workplace, not cafeteria</td>
<td>□ Other (describe below)</td>
</tr>
<tr>
<td></td>
<td>□ Workplace, not cafeteria</td>
</tr>
<tr>
<td>□ Workplace, cafeteria</td>
<td>□ Unknown</td>
</tr>
<tr>
<td></td>
<td>□ Workplace, cafeteria</td>
</tr>
</tbody>
</table>

Remarks:

Remarks:

**FOOD WORKERS**

Was food-worker implicated as the source of contamination? □ Yes □ No

If yes, please check one of the following:

□ Laboratory and epidemiologic evidence
□ Epidemiologic evidence
□ Laboratory evidence

**PUBLIC HEALTH ACTIONS AND CONTROL MEASURES**

□ Health education information provided to cases and contacts

□ Cases evaluated for sensitive occupations or situations and excluded during contagious period if necessary

□

□

□

**DISCUSSION / CONCLUSION**

Please briefly summarize the findings of this outbreak investigation.

□ EH Field Investigation Form (Part 2) attached, if relevant

□ Red/Blue Form attached, if relevant

□ Supporting documentation attached, if relevant
## CONTRIBUTING FACTORS

<table>
<thead>
<tr>
<th>Contamination Factors (check all that apply)</th>
<th>Proliferation/Amplification Factors (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ C1 Toxic substance part of tissue</td>
<td>□ P1 Food preparation practices that support proliferation of pathogens (during food preparation)</td>
</tr>
<tr>
<td>□ C2 Poisonous substance intentionally/deliberately added</td>
<td>□ P2 No attempt was made to control the temperature of implicated food or the length of time food was out of temperature control (during food service or display of food)</td>
</tr>
<tr>
<td>□ C3 Poisonous or physical substance accidentally/inadvertently added</td>
<td>□ P3 Improper adherence of approved plan to use Time as a Public Health Control</td>
</tr>
<tr>
<td>□ C4 Addition of excessive quantities of ingredients that are toxic in large amounts</td>
<td>□ P4 Improper cold holding due to malfunctioning refrigeration equipment</td>
</tr>
<tr>
<td>□ C5 Toxic container</td>
<td>□ P5 Improper cold holding due to an improper procedure or protocol</td>
</tr>
<tr>
<td>□ C6 Contaminated raw product – food was intended to be consumed after a kill step</td>
<td>□ P6 Improper hot holding due to malfunctioning equipment</td>
</tr>
<tr>
<td>□ C7 Contaminated raw product – food was intended to be consumed raw or undercooked/underprocessed</td>
<td>□ P7 Improper hot holding due to improper procedure or protocol</td>
</tr>
<tr>
<td>□ C8 Foods originating from sources shown to be contaminated or polluted (such as a growing field or harvest area)</td>
<td>□ P8 Improper/slow cooling</td>
</tr>
<tr>
<td>□ C9 Cross-contamination of ingredients (cross-contamination does not include ill food workers)</td>
<td>□ P9 Prolonged cold storage</td>
</tr>
<tr>
<td>□ C10 Bare-hand contact by a food handler/worker/preparer who is suspected to be infectious</td>
<td>□ P10 Inadequate modified atmosphere packaging</td>
</tr>
<tr>
<td>□ C11 Glove-hand contact by a food handler/worker/preparer who is suspected to be infectious</td>
<td>□ P11 Inadequate processing (acidification, water activity, fermentation)</td>
</tr>
<tr>
<td>□ C12 Other mode of contamination (excluding cross-contamination) by a food handler/worker/preparer who is suspected to be infectious</td>
<td>□ P12 Other situations that promoted or allowed microbial growth or toxic production</td>
</tr>
<tr>
<td>□ C13 Foods contaminated by non-food handler/worker/preparer who is suspected to be infectious</td>
<td>□ P-N/A Proliferation/Amplification Factors - Not Applicable</td>
</tr>
<tr>
<td>□ C14 Storage in contaminated environment</td>
<td>□ Contributing factors unknown</td>
</tr>
<tr>
<td>□ C15 Other source of contamination (e.g., hand washing)</td>
<td>□ Contamination Factors Not Applicable</td>
</tr>
</tbody>
</table>

### Survival Factors (check all that apply)

<table>
<thead>
<tr>
<th>Survival Factors (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ S1 Insufficient time and/or temperature control during initial cooking/heat processing</td>
</tr>
<tr>
<td>□ S2 Insufficient time and/or temperature during reheating</td>
</tr>
<tr>
<td>□ S3 Insufficient time/temperature control during freezing</td>
</tr>
</tbody>
</table>

### The confirmed or suspected point of contamination (check one)

<table>
<thead>
<tr>
<th>The confirmed or suspected point of contamination (check one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Before preparation □ Preparation □ If ‘before preparation’: □ Pre-harvest □ Processing □ Unknown</td>
</tr>
</tbody>
</table>

### Reason suspected (check all that apply)

<table>
<thead>
<tr>
<th>Reason suspected (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Environmental evidence □ Laboratory evidence □ Epidemiologic evidence □ Prior experience makes this a likely source</td>
</tr>
</tbody>
</table>