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Persons with disabilities experiencing problems accessing this document should contact CDC-INFO at CDC-INFO@cdc.gov, 800-232-4636 or the TTY number at (888) 232-6348 and ask for a 508 Accommodation PR#9342. If emailing please type "508 Accommodation PR#9342" without quotes in the subject line of the email.
**E. INVESTIGATION OF A FOODBORNE OUTBREAK**

1. Where did the outbreak occur?
   - State: __________
   - City or Town: ________
   - County: __________

2. Date of outbreak (Date of onset 1st case)
   - (3-8)

3. Indicate actual (a) or estimated (e) numbers:
   - Persons exposed: (a-11)
   - Persons ill: (12-14)
   - Hospitalized: (15-16)
   - Fatal cases: (17)

4. History of Exposed Persons:
   - No. histories obtained: 16-20
   - No. persons with symptoms: 21-23
   - No. seen: 24-26
   - Diarrhea: 33-36
   - Vomiting: 37-39
   - Fever: 38-40
   - Cramps: 30-32
   - Other, specify: (39)

5. Incubation period (hours):
   - Shortest: (40-42) Longest: (43-45) Approx. for majority: (46-48)

6. Duration of illness (hours):
   - Shortest: (49-51) Longest: (52-54) Approx. for majority: (55-57)

7. Food-specific attack rates: (58)

<table>
<thead>
<tr>
<th>Food Items Served</th>
<th>Number of persons who ATE specified food</th>
<th>Number of persons who DID NOT eat specified food</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>III</td>
<td>Not III</td>
</tr>
</tbody>
</table>

8. Vehicle responsible (food item incriminated by epidemiological evidence): (59, 60)

9. Manner in which incriminated food was marketed: (Check all applicable)
   - (a) Food Industry: (61)
     - Raw: (1) Ordinary Wrapping: (2) Canned: (3) Canned-Vacuum Sealed: (4) Other (specify): (5)
     - Processed: (6) Refrigerated: (7) Frozen: (8) Heated: (9)
   - (b) Vending Machine: (62)
     - Room Temperature: (1) Refrigerated: (2) Frozen: (3) Heated: (4)

10. Place of Preparation of Contaminated Items: (65)
    - Restaurant: (1)
    - Delicatessen: (2)
    - Cafeteria: (3)
    - Private Home: (4)
    - Caterer: (5)
    - Institution: (6)
      - School: (7)
      - Church: (8)
      - Camp: (9)
    - Other, specify: (10)

11. Place where eaten: (66)
    - Restaurant: (1)
    - Delicatessen: (2)
    - Cafeteria: (3)
    - Private Home: (4)
    - Picnic: (5)
    - Institution: (6)
      - School: (7)
      - Church: (8)
      - Camp: (9)
    - Other, specify: (10)

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
CENTER FOR DISEASE CONTROL
BUREAU OF EPIDEMIOLOGY
ATLANTA, GEORGIA 30323

CDC 4.245
12-73

(Over)
### LABORATORY FINDINGS (Include Negative Results)

**12. Food specimens examined** (67)
Specify by “X” whether food examined was original (taken at time of outbreak) or check-up (prepared in similar manner but not involved in outbreak)

<table>
<thead>
<tr>
<th>Item</th>
<th>Orig</th>
<th>Check up</th>
<th>Qualitative</th>
<th>Quantitative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: beef</td>
<td>X</td>
<td></td>
<td>C. perfringens, Hobbs type 10</td>
<td>2x10⁶/gram</td>
</tr>
</tbody>
</table>

**13. Environmental specimens examined** (68)

<table>
<thead>
<tr>
<th>Item</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: meat grinder</td>
<td>C. perfringens, Hobbs Type 10</td>
</tr>
</tbody>
</table>

**14. Specimens from patients examined (stool, vomitus, etc.)** (69)

<table>
<thead>
<tr>
<th>Item</th>
<th>No. Persons</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: stool</td>
<td>11</td>
<td>C. perfringens, Hobbs Type 10</td>
</tr>
</tbody>
</table>

**16. Factors contributing to outbreak (check all applicable)**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Improper storage or holding temperature</td>
<td>2 (71)</td>
</tr>
<tr>
<td>2. Inadequate cooking</td>
<td>2 (72)</td>
</tr>
<tr>
<td>3. Contaminated equipment or working surfaces</td>
<td>2 (73)</td>
</tr>
<tr>
<td>4. Food obtained from unsafe source</td>
<td>2 (74)</td>
</tr>
<tr>
<td>5. Poor personal hygiene of food handler</td>
<td>2 (75)</td>
</tr>
<tr>
<td>6. Other, specify</td>
<td>2 (76)</td>
</tr>
</tbody>
</table>

**17. Etiology** (77, 78)

<table>
<thead>
<tr>
<th>Pathogen</th>
<th>Chemical</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suspected</td>
<td>1 (78)</td>
<td>2</td>
</tr>
<tr>
<td>Confirmed</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**18. Remarks**: Briefly describe aspects of the investigation not covered above, such as unusual age or sex distribution, unusual circumstances leading to contamination of food, water, epidemic curve, etc. Attach additional page if necessary!

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**Name of reporting agency** (180)

**Investigating official**

**Date of investigation**

**NOTE**: Epidemiologic assistance for the investigation of a foodborne outbreak is available upon request by the State Health Department to the Center for Disease Control, Atlanta, Georgia 30333.

To improve national surveillance, please send a copy of this report to:

Center for Disease Control

Attn: Enteric Diseases Section, Bacterial Diseases Branch, SE

Atlanta, Georgia 30333

Submitted copies should include as much information as possible, but the completion of every item is not required.

CDC 4.245 (BACK)

12-73