

Foodborne Other/Unknown Investigation Overview

The following guidelines provide a brief overview of the steps of a foodborne disease investigation which may be caused from otherwise unreportable organisms such as *Bacillus cereus* and others. Symptoms are typically abdominal cramps, nausea, vomiting and diarrhea.

For additional support, consult the NC Communicable Disease Branch at (919) 733-3419.

Basic Steps of a Foodborne Other/Unknown Investigation Overview

1. Collect clinical information	<ul style="list-style-type: none"> • Obtain healthcare provider clinical notes from date(s) of service for this disease/condition. • Look for evidence in the medical record that supports clinical findings described in the case definition: nausea, vomiting, abdominal cramps, and diarrhea.
2. Ensure case definition is met	<ul style="list-style-type: none"> • Isolation of infectious agent or toxin compatible with symptoms from any clinical specimen • Usually nausea, vomiting, abdominal cramps and diarrhea are present
3. Determine the incubation period	<ul style="list-style-type: none"> • May vary depending upon identified or suspected disease
4. Manage the case	<ul style="list-style-type: none"> • Determine if requirements for case definition are met • Interview the case and complete the Part 2 Form/risk history and clinical packages in NCEDSS
5. Identify source of exposure	<ul style="list-style-type: none"> • Review clinical records for potential source(s) of exposure • Determine whether there are other ill individuals • Is this part of an outbreak? <ul style="list-style-type: none"> • If yes, notify CD Branch immediately • If potential source of exposure is not evident in clinical information, interview patient to obtain additional information including contact with animals, soil, consumption of raw/undercooked meat, etc. • If pathogen is unknown and evidence of illness associated with a restaurant, childcare center, medical facility or other identified location, consult with Environmental Health Specialist and CD Branch to design investigation steps • If pathogen is unknown but a specific vehicle is suspected, consult with Environmental Health Specialist and CD Branch to arrange for collecting samples and submitting them for testing, if appropriate
6. Review laboratory information	<ul style="list-style-type: none"> • Review laboratory report(s) specific to this disease • Contact healthcare provider if further testing of the patient is indicated • If further laboratory testing seems indicated, discuss sending specimens to the SLPH with the on-call epidemiologist from the CD Branch

<p>7. Public Health Preparedness and Response (PHPR)</p>	<ul style="list-style-type: none"> • If bioterrorism event, inform SLPH by calling the BT Duty pager at (919) 310-4243 or cell phone at (919)807-8600 • Inform local Preparedness Coordinator • If bioterrorism event likely, call the PHPR 24/7 pager (877) 236-7477 • If non-bioterrorism event, public health workers should exercise caution in doing environmental investigations • If bioterrorism event, NC Department of Public Safety will direct on-site environmental investigation
<p>8. Implement Control Measures to Prevent Disease and Additional exposures</p>	<ul style="list-style-type: none"> • General control measures include excluding from high-risk settings until diarrhea has resolved, proper handwashing, not preparing food for non-household members.
<p><i>Resources – CDB based on historical disease investigations</i></p>	
<p>Critical Elements for NCEDSS</p>	
<ul style="list-style-type: none"> ➤ Document if high risk (food worker, childcare attendee/worker or healthcare worker) ➤ Document if patient resides or has been in a congregate living situation (LTCF, Assisted Living, Camp, etc.) 	