

LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

NC REPORTABLE DISEASE/CONDITION	INFECTIOUS AGENT (S)
FOODBORNE DISEASE	<i>Other/Unknown</i> <i>(including norovirus, bacillus cereus)</i>
PREPARING FOR INVESTIGATION	
KNOW THE DISEASE/CONDITION	<ul style="list-style-type: none"> • Read about Foodborne Disease in the CD Manual. • See the case definition for Foodborne Disease: Other/Unknown in the CD Manual. • Study APHA <i>Control of Communicable Diseases Manual</i>, 19th ed., pp 239 - 240 and 256 - 258. • Print and review reporting forms: <p style="margin-left: 40px;"><i>Part 1: Confidential Disease Report (DHHS 2124)</i> <i>Part 2: Foodborne Disease: Other/Unknown (DHHS/EPI #13)</i></p>
CONDUCTING INVESTIGATION	
COLLECT CLINICAL INFORMATION	<ul style="list-style-type: none"> • If patient hospitalized for this disease, obtain medical record (admission note, progress note, chest x-ray(s), biopsy report(s), other lab report(s), and discharge summary). • 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.
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.
APPLY THE CASE DEFINITION	<ul style="list-style-type: none"> • Use the case definition to determine if the clinical and laboratory findings meet the case definition criteria.
IMPLEMENTING CONTROL MEASURES	
ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE	<ul style="list-style-type: none"> • Review clinical records for potential source(s) of exposure. • 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.

<p>IMPLEMENT CONTROL MEASURES TO PREVENT DISEASE AND ADDITIONAL EXPOSURES</p>	<ul style="list-style-type: none"> • If pathogen is unknown but there is evidence of illness associated with a restaurant, child care 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.
<p>REPORTING INVESTIGATION</p>	
<p>REPORT TO NC COMMUNICABLE DISEASE BRANCH (CD)</p>	<ul style="list-style-type: none"> • Enter Part 1 and Part 2 Communicable Disease Reports into NC EDSS as a new event, or update the existing event if already entered. • Assign event to State Disease Registrar when case investigation complete.
<p>CASE FINDING</p>	<ul style="list-style-type: none"> • During the course of the investigation, interview other exposed individuals for symptoms of illness. • Refer symptomatic individuals to healthcare provider for evaluation.
<p>SPECIAL CONSIDERATIONS</p>	
<p>STATE LABORATORY OF PUBLIC HEALTH (SLPH) TESTING</p>	<ul style="list-style-type: none"> • Inform CD epidemiologist on call if outbreak related specimens are being sent to the SLPH for testing. • Verify the laboratory test results of all cases by sending specimen(s) to the SLPH/CDC for reference testing. • If bioterrorism event, inform SLPH by calling the BT Duty pager at (919) 310-4243 or cell phone at (919) 807-8600.
<p>PUBLIC HEALTH PREPAREDNESS AND RESPONSE (PHPR)</p>	<ul style="list-style-type: none"> • Inform local Preparedness Coordinator. • If bioterrorism event likely, call the PHPR 24/7 pager (877) 236-7477.
<p>PERSONAL PROTECTIVE MEASURES</p>	<ul style="list-style-type: none"> • If non-bioterrorism event, public health workers should exercise caution in doing environmental investigations. • If bioterrorism event, crime control and public safety will direct on-site environmental investigation.
<p>RISK COMMUNICATION</p>	<ul style="list-style-type: none"> • Consider using risk communication tools conservatively if this is a low profile, naturally-occurring case. • Outbreaks of even naturally-occurring cases will need NC HAN alerts, EPI-X reports, MD alerts, and probably a press release. • In a bioterrorism event, pre-existing crisis communication plans should be enacted. • NC DHHS Public Information Office (919) 733-9190 is available to assist local health departments as needed.