Use this form only for outbreaks that are determined to be person-to-person, NOT foodborne.

# Person-to-Person Gastroenteritis Outbreak Report Form

***Instructions:*** *Please complete this report form for all person-to-person gastroenteritis outbreaks. Be sure to fill in all fields to ensure completeness of the report. Completing this report will meet Threat Preparedness grant requirements and reporting elements needed for evaluation of how outbreaks are investigated throughout West Virginia. Once completed, please email it to your designated outbreak lead at the West Virginia Department of Health and Human Resources, Bureau for Public Health, Office of Epidemiology and Prevention Services, Division of Infectious Disease Epidemiology.*

Outbreak number: Region: Contact information for person who first notified health department about the outbreak:

Reported by:

Date investigation initiated by the agency:

Date reported:

Name(s) report prepared by: County:

Title(s): Phone:

**INTRODUCTION AND BACKGROUND *(This section is what was reported in the initial outbreak call)***

At the time of the **initial** report:

|  |  |  |  |
| --- | --- | --- | --- |
| **Residents/Attendees** | | **Staff** | |
| Initial number of residents/attendees ill: |  | Initial number of staff ill: |  |
| Total number of residents/attendees: |  | Total number of staff: |  |

Facility name: Name of facility contact: Facility address:

Facility type:  Nursing home  Assisted living  School  Other, specify: Date of first onset: Onset date of last case:

# RECOMMENDATIONS

During this outbreak, the following recommendations were made to control this outbreak and prevent similar future outbreaks: (check all that apply)

 Emphasize hand hygiene

 Exclude ill staff or attendees from work  Environmental cleaning

 Consider closing to new admissions  Discontinue group activities

 Discourage use of anti-motility medications during outbreaks

# METHODS

**Case Definitions** *(check definition used for this outbreak)*:

Probable Case Definition

Cohort staff Restrict visitation Cohort ill residents

Serve meals in rooms Use contact precautions

Other, specify:

 Multiple episodes of vomiting or multiple episodes of diarrhea in a 24-hour period.

Confirmed Case Definition

 Meets probable case definition and is laboratory confirmed.

## Investigation Methods (check all that apply):

Spoke with infection preventionist Visited facility

Defined and identified cases Conducted interviews or survey Collected specimens

Confirmed diagnosis or lab results Performed environmental assessment Reviewed charts or other documents Other (specify):

## Data Analysis:

 Descriptive (e.g., epi curve, attack rates)

Analytic study (e.g., case-control or cohort study)

 Other (specify):

**RESULTS** *Attach any epi curve and/or other data analysis. (To be completed at time of outbreak closure)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Residents/Attendees** | | **Staff** | |
| Final number of residents/attendees ill\*: |  | Final number of staff ill\*: |  |
| Total number of residents/attendees: |  | Total number of staff: |  |

\*Number who meets probable or confirmed case definition used for outbreak

## Clinical Illness Characteristics: Predominant Symptoms:

|  |  |  |  |
| --- | --- | --- | --- |
| Number of cases with each symptom | | | |
| Fever: |  | Other: |  |
| Diarrhea: |  | Other: |  |
| Vomiting: |  | Other: |  |

Average duration of illness (specify days): Number of individuals admitted to a hospital:

Number of individuals who died:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Number of cases in each age group | | | | | |
| < 1 yr |  | 10-17 yrs |  | 65-74 yrs |  |
| 1-4 yrs |  | 18-49 yrs |  | >75 yrs |  |
| 5-9 yrs |  | 50-64 yrs |  | Unknown |  |

|  |  |
| --- | --- |
| Number of cases in each gender | |
| Male |  |
| Female |  |
| Unknown |  |
| Other |  |

**Laboratory** *(attach copies of any laboratory results including any special methods such as Whole Genome Sequencing)*

|  |  |
| --- | --- |
| Test Information | |
| Total # samples tested |  |
| # samples tested positive via CIDT |  |
| # samples culture-confirmed |  |

|  |  |
| --- | --- |
| Pathogen Detection Information | |
| Pathogen 1 |  |
| Pathogen 2 |  |

# CONCLUSION/DISCUSSION

A person-to-person outbreak of occurred at facility that affected

residents/attendees and staff members. Illness onsets ranged from to . cases were hospitalized and deaths occurred. The average duration of illness was days.

**Additional Comments:**