

## Changes/differences from Form 52.13 (eFORS) to NORS form

In order as presented in NORS form.

**Report Type** section from Form 52.13 has been deleted. Question A was deleted because the new electronic system will be able to maintain a log of which outbreaks have been finalized and which person at the reporting agency finalized it. Question B was deleted because reporting agencies noted it as a source of confusion. It was originally presented so that local agencies could indicate to state agencies that the report was 'final' and ready for 'finalization' by the state agency, but it was not used as intended.

### General Section

This section is a shared section with animal contact, foodborne, person-to-person, and waterborne outbreak reporting systems. This form does not intend to collect information regarding waterborne outbreaks.

#### *Primary Mode of Transmission*

This section, formally identified as "Mode of Transmission," allows agencies to indicate an additional mode of disease transmission (environmental contamination other than food/water) that was not captured by the previous foodborne reporting form. An agency indicating 'environmental contamination other than food/water' will not complete a new section. The NORS form contains additional sections to collect outbreak information for animal contact and person-to-person disease transmissions.

#### *Investigation Methods*

An open text 'comment' field has been added to allow agencies to report additional information regarding investigation methods.

#### *Dates*

Two date variables added. The additional variables can be used to identify when reporting agencies requested assistance and provide an approximate timeframe for the length of the outbreak investigation.

#### *Primary Cases*

This section, formally identified as 'Number of Cases' has been expanded to obtain separate information regarding primary and secondary cases (if, applicable). Outbreaks can have more than one mode of transmission; Form 52.13 did not explicitly allow for a distinction.

- The '# Visited health care provider (excluding ER visits)' added will allow a better approximation of case severity because cases may not visit an ER, instead a primary care physician or urgent care physician may be visited.
- Under *Approximate percent of primary cases in each age group*, '≥ 50 years' has been expanded to 50–74 years and ≥ 75 years, which allows a better examination of the age distribution among the elderly.

- Due to outbreaks from agencies reporting etiologies with *quick* incubation and/or duration of illness, ‘minutes’ is now available as a unit of measure for *Incubation Period* and *Duration of Illness*. This is not a new question.
- Under *Signs or Symptoms*, ‘HUS or TTP’ was replaced with ‘HUS.’ HUS (Hemolytic Uremic Syndrome) is similar to TTP (Thrombotic Thrombocytopenic Purpura); both are rare blood-coagulation disorders. TTP is no longer believed to be a possible symptom of foodborne disease, and no longer relevant for outbreak reporting.

#### *Secondary Mode of Transmission*

Previously discussed. This section was formally apart of Form 52.13 “Number of Cases,” and this section asks agencies to identify the ‘Mode of Secondary Transmission.’

#### *Environmental Health Specialists Network*

If applicable, this new section allows agencies to identify up to three Environmental Health Specialists Network (EHS-Net) identification numbers. The web-based reporting system will integrate EHS-Net data, thereby, linking NORS outbreak reports to multiple EHS-Net reports. Such linkage is essential in continual efforts to integrate outbreak data with laboratory data within and across CDC divisions.

#### *Recall*

An open text ‘Type of item recalled’ added to allow agencies to identify additional information regarding recalls.

### **Laboratory Section**

If etiology is unknown, two new questions are presented. Outbreaks that identify a known etiology are used for publications, as well as essential for our stakeholders when establishing legislations. Outbreaks with unknown etiology makes-up more than 60% of foodborne outbreak data, so additional information regarding such outbreaks will improve data quality and permit enhanced assessment of outbreak trends.

#### *Etiology*

One additional question is presented, which will allow effective data cleaning. The data will ensure that the etiology classification definitions are achieved.

#### *Isolates*

Two additional questions are presented. These new questions permit agencies to identify laboratory identification numbers related to the outbreak and allow a link between outbreak data and laboratory data. Such linkage is essential in continual efforts to integrate outbreak data with laboratory data within and across CDC divisions.

## **Person to Person**

This is a new section. This mode of transmission was not explicitly collected by Form 52.13. This section improves data collection for person-to-person disease transmission, which is essential for monitoring outbreak trends.

### *Major setting of exposure and Other settings of exposure*

This question is presented in Form 52.13, but now we would like the same information for person-to-person transmission; data collected from this question will improve data quality, and allow the observation of exposure trends among outbreaks.

### *Attack rates for major settings of exposure*

This is not a new question; however, multiple attack rates now can be entered. Attack rates may be different among groups; therefore, obtaining data for these distinctions are important while conducting and reporting outbreak investigations.

## **Animals and their environment**

This new section presents two questions and offers a comment/remark field. This section, allows agencies to indicate animal contact as a mode of disease transmission, which was not captured by Form 52.13. Recent multi-state outbreaks investigated by our Branch have increased awareness of animals and their environment as a transmission source. The data is essential to monitor trends in animal contact disease outbreaks.

## **Food-specific data**

- To improve data quality for foods associated with an outbreak, two new questions are presented. These new questions will provide additional information regarding food processing and preparation that will be used to improve food classifications for more accurate data dissemination; Form 52.13 does not explicitly capture such precise information.
- Information about imported contaminated foods was presented on Form 52.13, and is expanded by two questions. The additional data will improve data quality and allow examination of possible food importation concerns and/or deficiencies.

### *Location where food was prepared and Location of exposure (where food was eaten)*

This is not a new section. One option has been expanded to allow greater detail among selections to improve data quality. Two options were deleted as they are no longer relevant for outbreak reporting, and one option was expanded (contaminated food imported into US, previously discussed).

### *The confirmed or suspected point of contamination*

This is new section to improve data collection, allowing an answer for 'how and when food became contaminated.' Contamination trends now can be examined to allow local, state, and federal agencies to suggest more precise preventions measures.

### **Additional Salmonella Questions**

If applicable, only complete this section given particular etiology-associated outbreak. This new section allows multiple responses for one question. Agencies can provide additional laboratory data related to the outbreak and allow a link between outbreak data and laboratory data. Such linkage is essential in continual efforts to integrate outbreak data with laboratory data within and across CDC divisions.