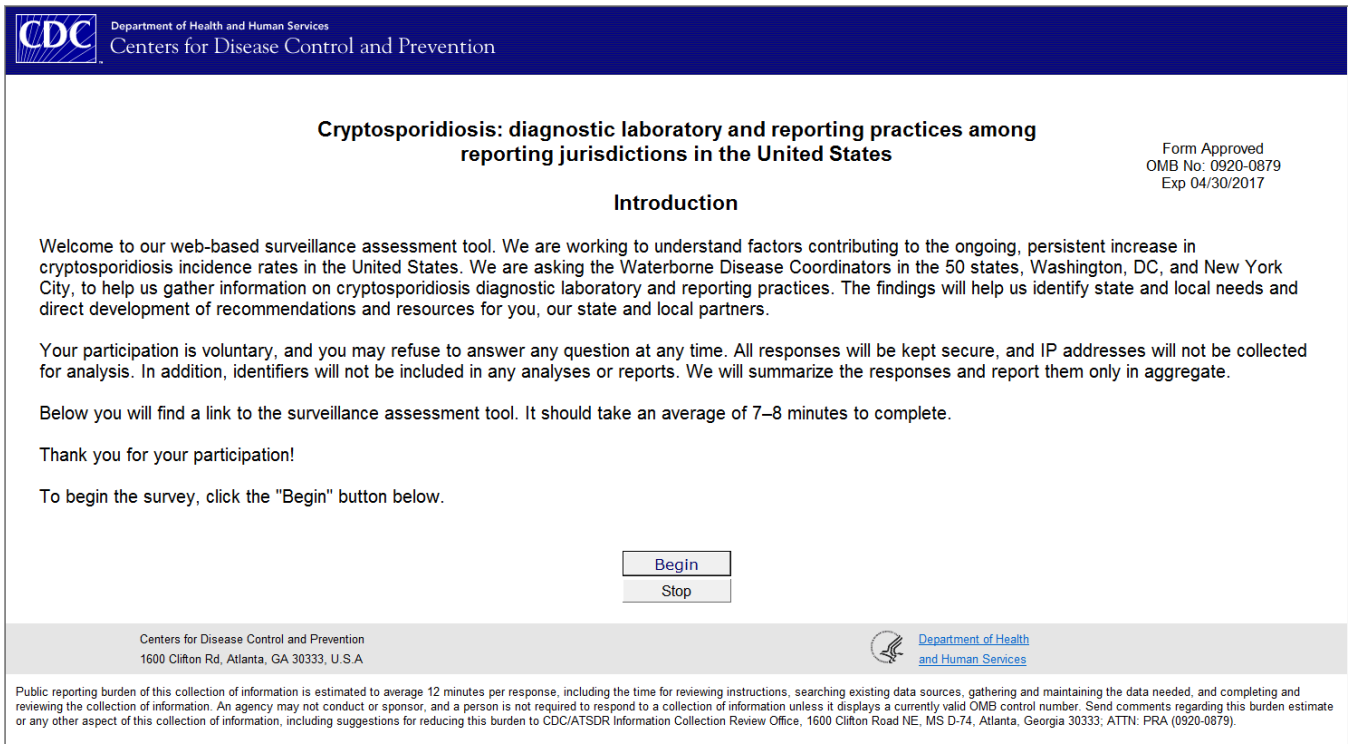
Attachment C—Instrument Web Version



Department of Health and Human Services
Centers for Disease Control and Prevention

Cryptosporidiosis: diagnostic laboratory and reporting practices among reporting jurisdictions in the United States

Form Approved
OMB No: 0920-0879
Exp 04/30/2017

Introduction

Welcome to our web-based surveillance assessment tool. We are working to understand factors contributing to the ongoing, persistent increase in cryptosporidiosis incidence rates in the United States. We are asking the Waterborne Disease Coordinators in the 50 states, Washington, DC, and New York City, to help us gather information on cryptosporidiosis diagnostic laboratory and reporting practices. The findings will help us identify state and local needs and direct development of recommendations and resources for you, our state and local partners.

Your participation is voluntary, and you may refuse to answer any question at any time. All responses will be kept secure, and IP addresses will not be collected for analysis. In addition, identifiers will not be included in any analyses or reports. We will summarize the responses and report them only in aggregate.

Below you will find a link to the surveillance assessment tool. It should take an average of 7–8 minutes to complete.

Thank you for your participation!

To begin the survey, click the "Begin" button below.

Begin
Stop

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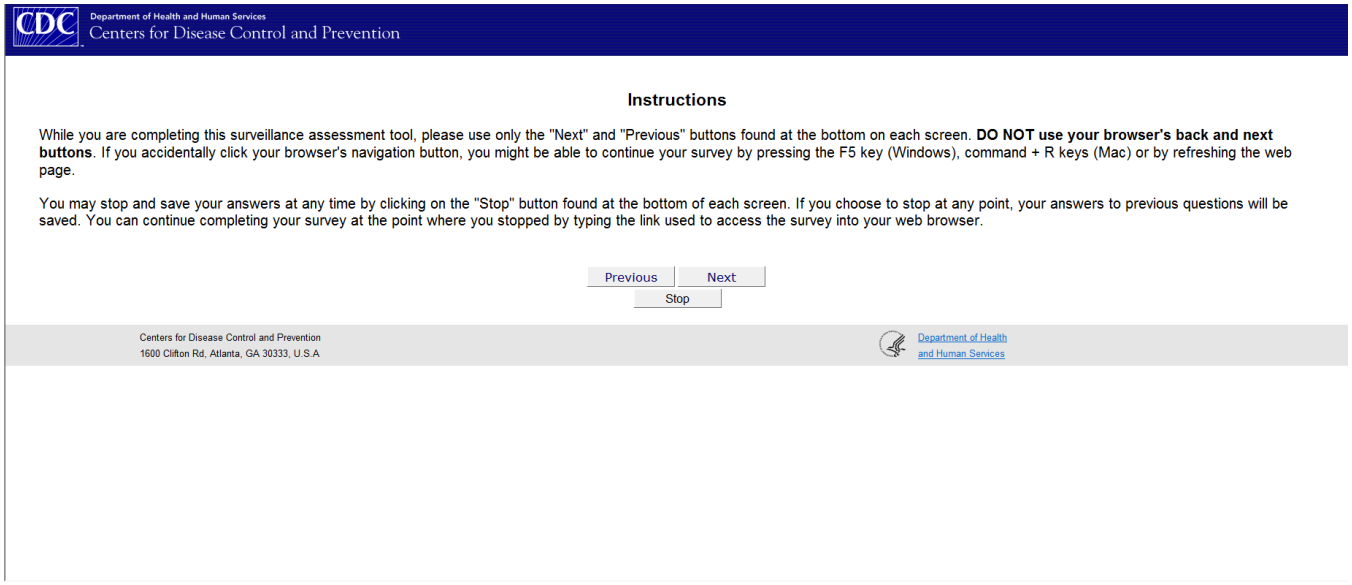
Public reporting burden of this collection of information is estimated to average 12 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).



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Instructions

While you are completing this surveillance assessment tool, please use only the "Next" and "Previous" buttons found at the bottom on each screen. **DO NOT use your browser's back and next buttons**. If you accidentally click your browser's navigation button, you might be able to continue your survey by pressing the F5 key (Windows), command + R keys (Mac) or by refreshing the web page.

You may stop and save your answers at any time by clicking on the "Stop" button found at the bottom of each screen. If you choose to stop at any point, your answers to previous questions will be saved. You can continue completing your survey at the point where you stopped by typing the link used to access the survey into your web browser.

Previous Next
Stop

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Reporting in your jurisdiction

The first set of questions asks about how cryptosporidiosis cases are reported in your jurisdiction.

How are cryptosporidiosis cases reported in your jurisdiction?
(*Select all that apply*)

- ☐ Laboratory report
- ☐ Healthcare provider report
- ☐ Hospital report
- ☐ Local health department report
- ☐ Other (specify): _____
- ☐ Prefer not to answer

Previous | Next
Stop

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Reporting in your jurisdiction

What are the cryptosporidiosis case classification options in your jurisdiction?
(*Select all that apply*)

- ☐ Confirmed
- ☐ Probable
- ☐ Suspect
- ☐ Unknown
- ☐ Other (specify): _____
- ☐ Prefer not to answer

Previous | Next
Stop

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Reporting in your jurisdiction

How often are each of the following types of information available from cryptosporidiosis reports received by your jurisdiction?

	Never 0%	Rarely 1–25%	Sometimes 26–50%	Mostly 51–75%	Almost always 76–100%	Prefer not to answer
Type of laboratory test used (e.g., DFA vs. rapid card test)	○	○	○	○	○	○
Brand of laboratory test used (e.g., ImmunoCard STAT! vs. ProSpect)	○	○	○	○	○	○
Information about exposures and risk factors	○	○	○	○	○	○

Previous Next
Stop

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Laboratory information

The next set of questions asks about cryptosporidiosis diagnostic laboratory practices in your jurisdiction.

If diagnostic laboratory test type (e.g., DFA vs. rapid card test) is not initially reported, how often do you follow up to identify the type of test used?

- ○ Never (0%)
- ○ Rarely (1–25%)
- ○ Sometimes (26–50%)
- ○ Mostly (51–75%)
- ○ Almost always (76–100%)
- ○ Not Applicable - diagnostic lab test type is always initially reported
- ○ Prefer not to answer

Previous Next
Stop

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Laboratory information

If diagnostic laboratory test brand (e.g., ImmunoCard STAT! vs. ProSpect) is not initially reported, how often do you follow up to identify the brand of test used?

- ○ Never (0%)
- ○ Rarely (1–25%)
- ○ Sometimes (26–50%)
- ○ Mostly (51–75%)
- ○ Almost always (76–100%)
- ○ Not Applicable - diagnostic lab test brand is always initially reported
- ○ Prefer not to answer

Previous Next
Stop

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Laboratory information

This question asks about cryptosporidiosis diagnostic practices by **CLINICAL LABORATORIES** in your jurisdiction.

What types of tests are used by clinical laboratories to diagnose cryptosporidiosis in your jurisdiction?
(*Select all that apply*)

- ☐ Don't know
- ☐ Stool rapid card test or lateral flow assay
- ☐ Stool immunoassay, such as EIA microplate
- ☐ PCR
- ☐ Microscopy-based
- ☐ Prefer not to answer

Previous Next
Stop

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Department of Health and Human Services
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Laboratory information

You indicated that **Stool rapid card tests or lateral flow assays** are used by clinical laboratories to diagnose cryptosporidiosis in your jurisdiction. Which brand(s) do they use?
(*Select all that apply*)

- ☐ XPect Cryptosporidium (Remel)
- ☐ XPect Giardia/Cryptosporidium (Remel)
- ☐ ImmunoCard STAT! Cryptosporidium/Giardia (Meridian)
- ☐ Triage Parasite Panel for Giardia, Entamoeba, and Cryptosporidium (Biosite)
- ☐ GIARDIA / CRYPTOSPORIDIUM QUIK CHEK (Alere)
- ☐ Other rapid card test (specify): _____
- ☐ Prefer not to answer

Previous | Next
Stop

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Laboratory information

You indicated that **Stool immunoassays, such as EIA microplate**, tests are used by clinical laboratories to diagnose cryptosporidiosis in your jurisdiction. Which brand(s) do they use?
(*Select all that apply*)

- ☐ ProSpecT Cryptosporidium (Remel)
- ☐ ProSpecT Giardia/Cryptosporidium (Remel)
- ☐ Cryptosporidium (Wampole)
- ☐ Cryptosporidium II (TechLab)
- ☐ Giardia/Cryptosporidium Chek (TechLab)
- ☐ Crypto CELISA (Cellabs)
- ☐ Para-TECT Cryptosporidium Antigen 96 (Medical Chemical Corporation)
- ☐ Other immunoassay test (specify): _____
- ☐ Prefer not to answer

Previous | Next
Stop

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Department of Health and Human Services
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Laboratory information

You indicated that **PCR** tests are used by clinical laboratories to diagnose cryptosporidiosis in your jurisdiction. Which brand(s) do they use?
(*Select all that apply*)

- ☐ Luminex® xTAG Gastrointestinal Pathogen Panel (GPP) PCR
- ☐ In-house PCR
- ☐ Other PCR assay (specify): _____
- ☐ Prefer not to answer

Previous | Next
Stop

Department of Health and Human Services
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Laboratory information

You indicated that **Microscopy-based** tests are used by clinical laboratories to diagnose cryptosporidiosis in your jurisdiction. Which do they use?
(*Select all that apply*)

- ☐ Bright field microscopy
- ☐ Acid fast microscopy
- ☐ Direct fluorescent antibody (DFA) or direct immunofluorescent antibody (IFA)
- ☐ Prefer not to answer

Previous | Next
Stop

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Laboratory information

You indicated that **Direct fluorescent antibody (DFA) or direct immunofluorescent antibody (IFA)** tests are used in your jurisdiction by clinical laboratories. Which brand(s) do they use?
(*Select all that apply*)

- ☐ Merifluor Cryptosporidium/Giardia (Meridian)
- ☐ PARA-TECT Cryptosporidium/Giardia DFA 75 (Medical Chemical Corporation)
- ☐ Crypto CEL (Cellabs)
- ☐ Crypto/Giardia CEL (Cellabs)
- ☐ Other DFA/IFA test (specify) _____
- ☐ Prefer not to answer

Previous Next
Stop

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Laboratory information

This question asks about cryptosporidiosis diagnostic practices by your **JURISDICTION'S PUBLIC HEALTH LABORATORY**.

What types of tests are used at the jurisdiction public health laboratory?
(*Select all that apply*)

- ☐ Don't know
- ☐ Stool rapid card test or lateral flow assay
- ☐ Stool immunoassay, such as EIA microplate
- ☐ PCR
- ☐ Microscopy-based
- ☐ N/A – jurisdiction laboratory does not test for cryptosporidiosis
- ☐ Prefer not to answer

Previous Next
Stop

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Laboratory information

You indicated that **Stool rapid card tests or lateral flow assays** are used by your jurisdiction's public health laboratory to diagnose cryptosporidiosis in your jurisdiction. Which brand(s) do they use?
(*Select all that apply*)

- ☐ XPect Cryptosporidium (Remel)
- ☐ XPect Giardia/Cryptosporidium (Remel)
- ☐ ImmunoCard STAT! Cryptosporidium/Giardia (Meridian)
- ☐ Triage Parasite Panel for Giardia, Entamoeba, and Cryptosporidium (Biosite)
- ☐ GIARDIA / CRYPTOSPORIDIUM QUIK CHEK (Alere)
- ☐ Other rapid card test (specify): _____
- ☐ Prefer not to answer

Previous | Next
Stop

Department of Health and Human Services
Centers for Disease Control and Prevention

Laboratory information

You indicated that **Stool immunoassays, such as EIA microplate,** tests are used by your jurisdiction's public health laboratory to diagnose cryptosporidiosis in your jurisdiction. Which brand(s) do they use?
(*Select all that apply*)

- ☐ ProSpecT Cryptosporidium (Remel)
- ☐ ProSpecT Giardia/Cryptosporidium (Remel)
- ☐ Cryptosporidium (Wampole)
- ☐ Cryptosporidium II (TechLab)
- ☐ Giardia/Cryptosporidium Chek (TechLab)
- ☐ Crypto CELISA (Cellabs)
- ☐ Para-TECT Cryptosporidium Antigen 96 (Medical Chemical Corporation)
- ☐ Other immunoassay test (specify): _____
- ☐ Prefer not to answer

Previous | Next
Stop

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Department of Health and Human Services
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Laboratory information

You indicated that **PCR** tests are used by your jurisdiction's public health laboratory to diagnose cryptosporidiosis in your jurisdiction. Which brand(s) do they use?
(*Select all that apply*)

- ☐ Luminex® xTAG Gastrointestinal Pathogen Panel (GPP) PCR
- ☐ In-house PCR
- ☐ Other PCR assay (specify): _____
- ☐ Prefer not to answer

Previous | Next
Stop

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Laboratory information

You indicated that **Microscopy-based** tests are used by your jurisdiction' public health laboratory to diagnose cryptosporidiosis in your jurisdiction. Which do they use?
(*Select all that apply*)

- ☐ Bright field microscopy
- ☐ Acid fast microscopy
- ☐ Direct fluorescent antibody (DFA) or direct immunofluorescent antibody (IFA)
- ☐ Prefer not to answer

Previous | Next
Stop

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Laboratory information

You indicated that **Direct fluorescent antibody (DFA) or direct immunofluorescent antibody (IFA)** tests are used in your jurisdiction by your jurisdiction's public health laboratory. Which brand(s) do they use?
(*Select all that apply*)

- ☐ Merifluor Cryptosporidium/Giardia (Meridian)
- ☐ PARA-TECT Cryptosporidium/Giardia DFA 75 (Medical Chemical Corporation)
- ☐ Crypto CEL (Cellabs)
- ☐ Crypto/Giardia CEL (Cellabs)
- ☐ Other DFA/IFA test (specify) _____
- ☐ Prefer not to answer

Previous Next
Stop

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Laboratory information

Does your jurisdiction. . .

	Yes	No	Prefer not to answer
offer confirmatory cryptosporidiosis diagnostic testing for external laboratories?	○	○	○
require submission of clinical specimens that are identified as positive for *Cryptosporidium* by external laboratories?	○	○	○
have the capacity for speciating *Cryptosporidium* isolates?	○	○	○
have the capacity for molecular subtyping of *Cryptosporidium* isolates?	○	○	○

Previous Next
Stop

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Laboratory information

You indicated your jurisdiction does not have the capacity for molecular subtyping of *Cryptosporidium* isolates. Does your jurisdiction have any interest in building capacity for molecular subtyping of Cryptosporidium isolates?

- ○ Yes
- ○ No
- ○ Prefer not to answer

Previous Next
Stop

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Laboratory information

CryptoNet is a program developed for molecular-based tracking to better understand cryptosporidiosis transmission in the United States. Does your jurisdiction have any interest in participating in CryptoNet now or in the future?

- ○ Yes
- ○ No
- ○ Already participate
- ○ Don't know
- ○ Prefer not to answer

Previous Next
Stop

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Department of Health and Human Services
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Follow-up with case-patients

When cryptosporidiosis cases are identified, are follow-up interviews conducted with case-patients?

- ○ Yes
- ○ No
- ○ Prefer not to answer

Previous Next
Stop

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Department of Health and Human Services
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Follow-up with case-patients

Who conducts follow-up interviews with case-patients?
(*Select all that apply*)

- ☐ Jurisdiction health department
- ☐ Local health departments
- ☐ Other (specify): _____
- ☐ Prefer not to answer

Previous Next
Stop

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Follow-up with case-patients

What proportion of case-patients is followed-up with interviews?

- ○ 100%
- ○ 75–99%
- ○ 50–74%
- ○ 25–49%
- ○ 0–24%
- ○ It differs by local health department
- ○ Don't know
- ○ Prefer not to answer

Previous Next
Stop

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Follow-up with case-patients

How are cases selected for follow-up interviews?
(*Select all that apply*)

- ☐ The jurisdiction attempts to interview all case patients
- ☐ The jurisdiction selects a random sample of case patients
- ☐ The jurisdiction selects a non-random sample of case patients
- ☐ Local health departments attempt to interview all case patients
- ☐ Local health departments select a random sample of case patients
- ☐ Local health departments select a non-random sample of case patients
- ☐ Case selection differs by local health department
- ☐ Don't know
- ☐ Prefer not to answer

Previous Next
Stop

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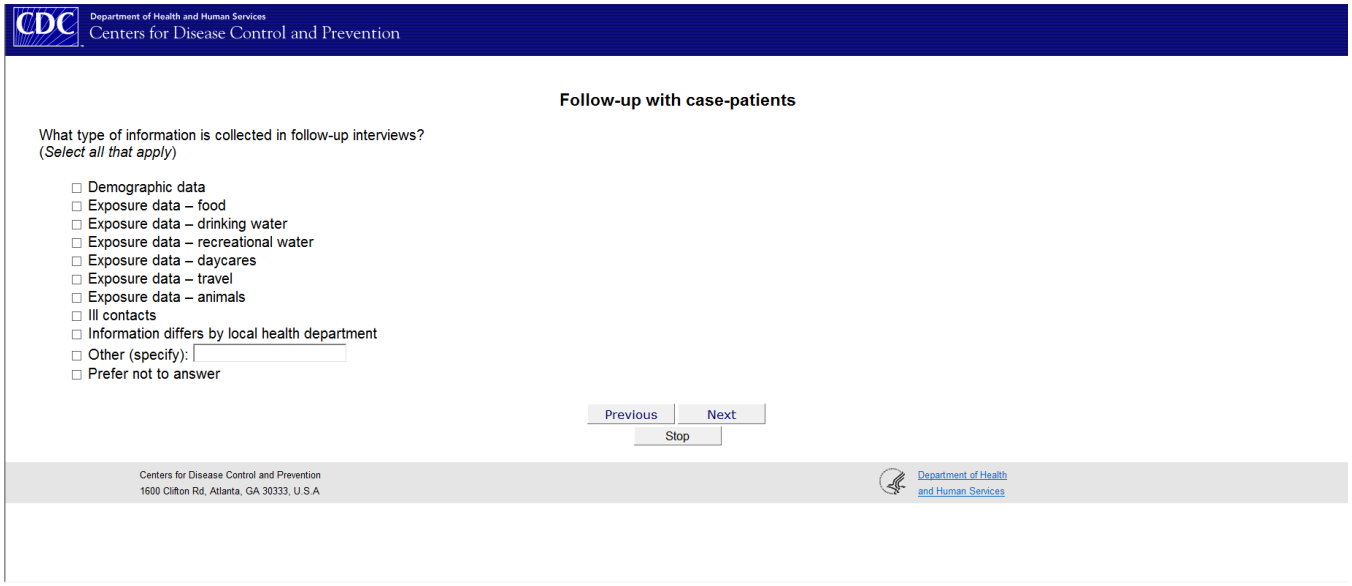
Department of Health and Human Services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Centers for Disease Control and Prevention
Follow-up with case-patients
What type of information is collected in follow-up interviews?
(Select all that apply)
Demographic data
Exposure data – food
Exposure data – drinking water
Exposure data – recreational water
Exposure data – daycares
Exposure data – travel
Exposure data – animals
Ill contacts
Information differs by local health department
Other (specify):
Prefer not to answer
Previous
Next
Stop
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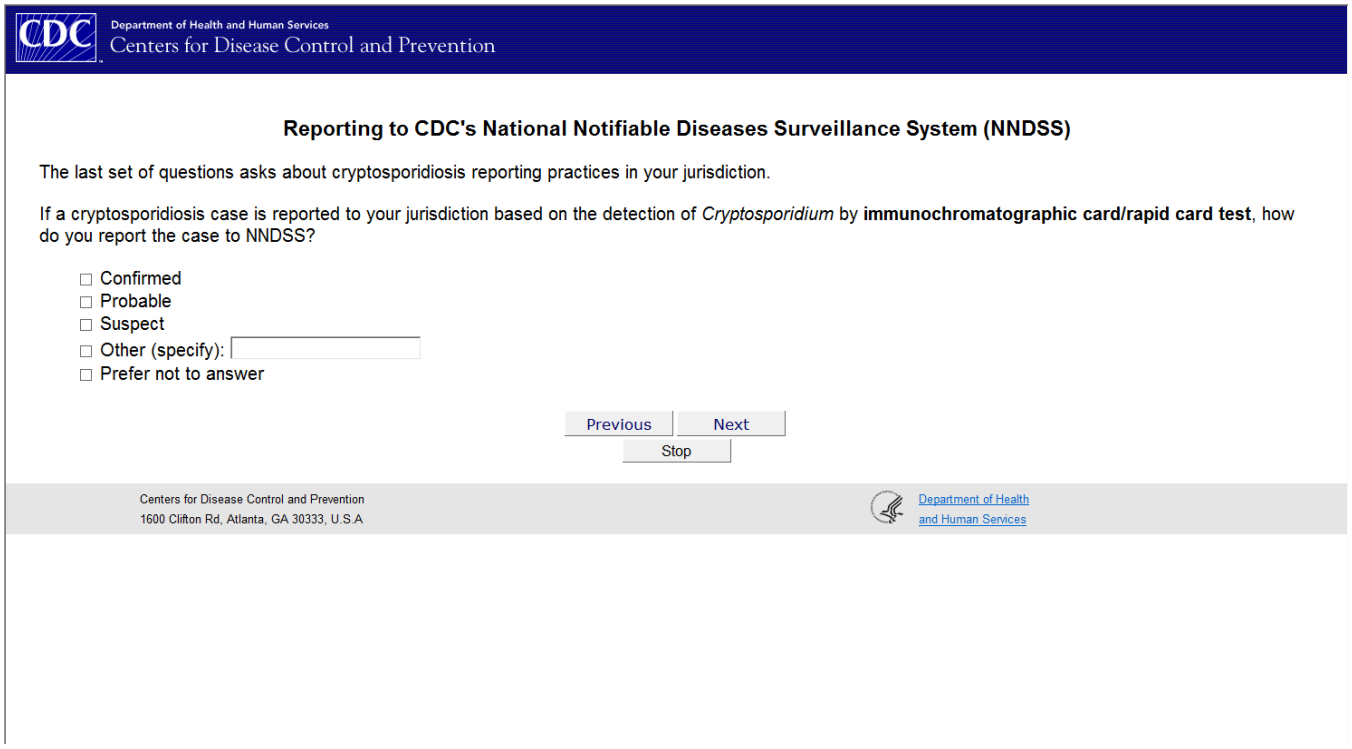
Department of Health and Human Services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Reporting to CDC's National Notifiable Diseases Surveillance System (NNDSS)
The last set of questions asks about cryptosporidiosis reporting practices in your jurisdiction.
If a cryptosporidiosis case is reported to your jurisdiction based on the detection of Cryptosporidium by immunochromatographic card/rapid card test, how do you report the case to NNDSS?
Confirmed
Probable
Suspect
Other (specify):
Prefer not to answer
Previous
Next
Stop
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Department of Health and Human Services


Department of Health and Human Services
Centers for Disease Control and Prevention
Reporting to CDC's National Notifiable Diseases Surveillance System (NNDSS)
If a cryptosporidiosis case is reported to your jurisdiction based on the detection of Cryptosporidium by a laboratory test of unknown method, how do you report the case to NNDSS?
Confirmed
Probable
Suspect
Other (specify):
Prefer not to answer
Previous
Next
Stop
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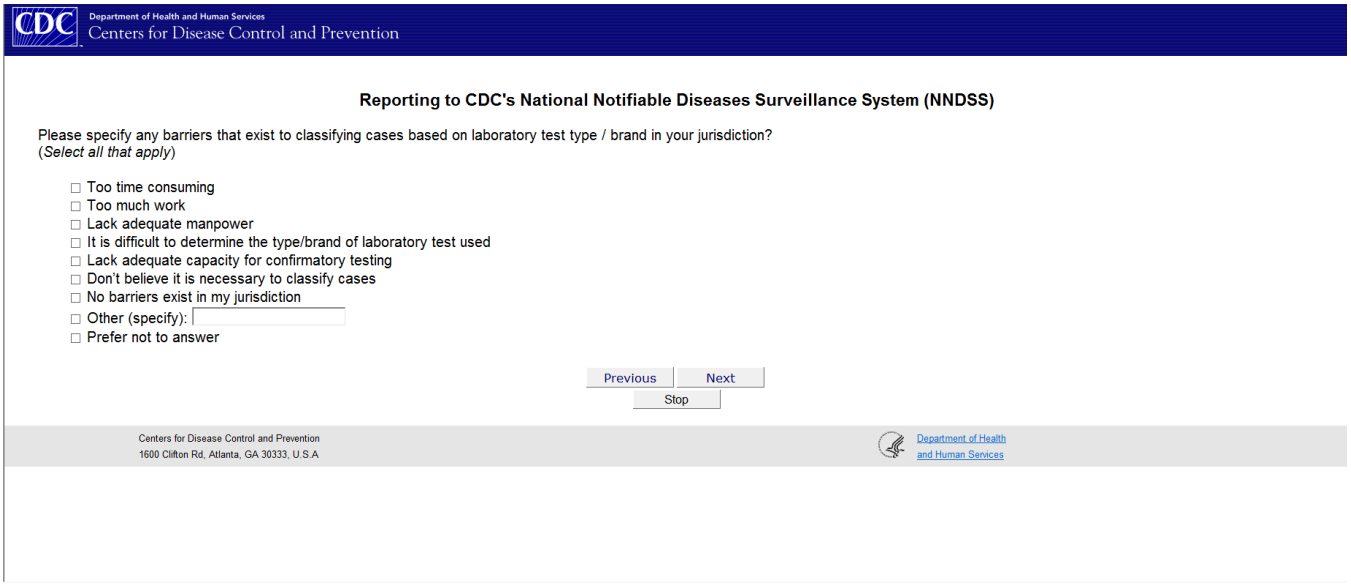
Department of Health and Human Services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Reporting to CDC's National Notifiable Diseases Surveillance System (NNDSS)
Please specify any barriers that exist to classifying cases based on laboratory test type / brand in your jurisdiction?
(Select all that apply)
Too time consuming
Too much work
Lack adequate manpower
It is difficult to determine the type/brand of laboratory test used
Lack adequate capacity for confirmatory testing
Don't believe it is necessary to classify cases
No barriers exist in my jurisdiction
Other (specify):
Prefer not to answer
Previous
Next
Stop
Centers for Disease Control and Prevention
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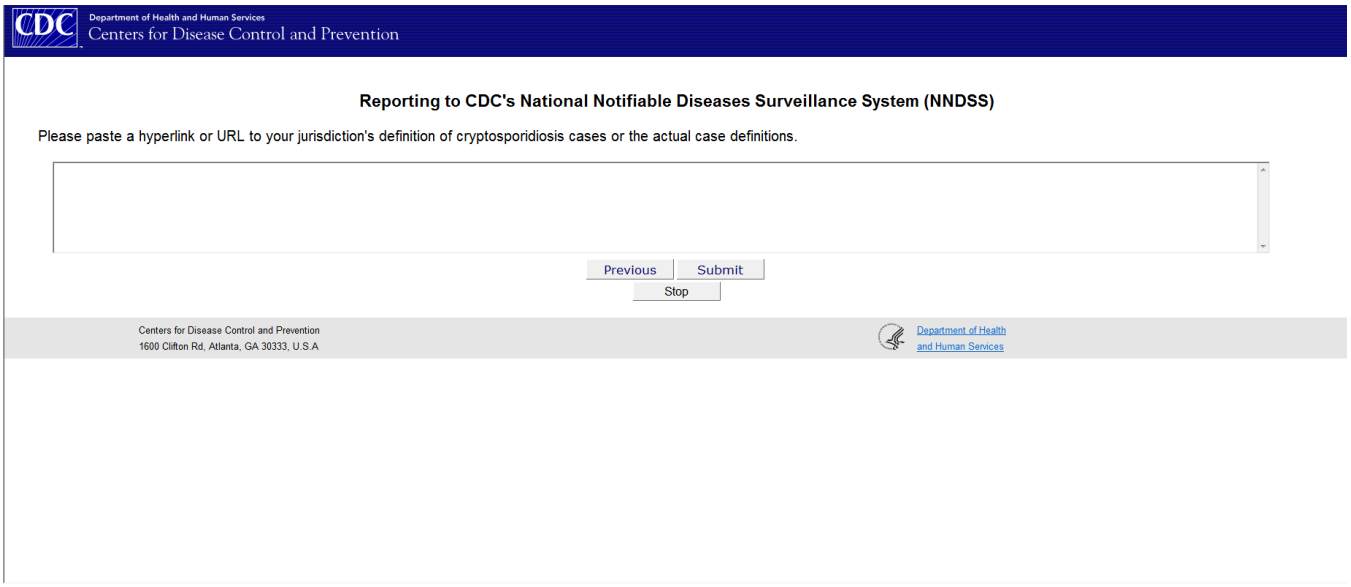
Department of Health and Human Services


Department of Health and Human Services
Centers for Disease Control and Prevention
Reporting to CDC's National Notifiable Diseases Surveillance System (NNDSS)
Please paste a hyperlink or URL to your jurisdiction's definition of cryptosporidiosis cases or the actual case definitions.
Previous
Submit
Stop
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