

0920-0009 National Disease Surveillance Program
 Exp. 4-30-2016
 Justification for Change
 October 1, 2014

On September 19, 2014 the Colorado Department of Public Health and Environment requested CDC assistance with an investigation to assist the state and local health department with the investigation to better characterize the common clinical presentation among reported patients consistent with neurological syndromes. Data collection initially focused on the single hospital where known cases had been reported. As information was disseminated about these cases in Colorado, other states began to report similar neurologic cases in children to the Colorado Department of Public Health and CDC, including Missouri, California, Massachusetts; cases in other states are possible. The etiology, mode of transmission, and risk factors in this outbreak remain unknown.

CDC is requesting a non-substantive change to 0920-0009 in order to collect case report data from all states.

Information about cases will be collected from state health departments, in consultation with clinicians, using a national case report form (Appendix 1). Case report forms will be sent from the state health department to CDC and will be analyzed to determine the geographic and temporal extent of the outbreak and identify the etiology, mode of transmission, and risk factors for infection. The geographic location of cases will not be known until case report forms are submitted by states. This information will be used to directly inform control measures to prevent additional cases.

State and Local health departments will be notified of the need to fill out case report form through various communications, including a health advisory, a notes from the field MMWR and a request to the Council of State and Territorial Epidemiologists (CSTE).

Data will be collected by clinicians and local and state health departments. Case report forms will be sent to CDC.

The national rollout for requesting case reporting will begin immediately.

CDC will use this information to identify etiology, modes of transmission, risk factors, and geographic distribution of the neurologic illness.

Attachment: Appendix I Acute Neurological Illness with Limb Weakness in Children: Patient Summary Form

Type of Respondent	Form Name	No. of Respondents	No. of Responses per Respondent	Average Burden per Response (in Hours)	Total Burden Hours
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State and Local Health Departments	Acute Neurological Illness with Limb Weakness in Children Patient Summary Form	30	1	30/60	15
Clinicians	Acute Neurological Illness with Limb Weakness in Children Patient Summary Form	70	1	30/60	35
Total					50