GenIC No.:	2016017-XXX				
EPI AID No. (if applicable):	2016-033				
Requesting entity (e.g., jurisdiction):	New York City Department of Health				
Title of Investigation:	Undetermined risk factors for Exophiala dermatitidis among oncology patients — New York City, 2016				
Purpose of Investigation: (Use as much space as necessary)	The purpose of the investigation was to 1) conduct case-finding; 2) characterize epidemiological and clinical aspects of case-patients, including exposures of interest; 3) conduct an epidemiological study to evaluate potential association between exposures and cases; 4) conduct an assessment of the infection control practices at oncology clinic; 5) perform environmental sampling as indicated by findings of the epidemiologic study; and 6) provide recommendations for preventative measures and remediation.				
Duration of Data Collection:	2 weeks				
Date Began:	June 1, 2016				
Date Ended:	June 15, 2016				
Lead Investigator					
Name:	Amber Vasquez				
CIO/Division/Branch:	NCEZID/DHQP				
Data Collection Instrument 1 Name of Data Collection Instru Type of Respondent					
General public	Healthcare staff Laboratory staff Patients Restaurant staff				
Other (describe): Fede	eral employees				
Descriptive Stud	ndicate which type(s) below) ly (describe): Study (describe): escribe):				
Other (describe)					
Environmental Assessn					
Laboratory Testing (des	scribe):				
Other (describe):					
Data Collection Mode (check at	ll that apply)				
☐ Survey Mode (indicate	which mode(s) below):				
☐ Face-to-face Inte	erview (describe):				
☐ Telephone Interv	view (describe):				
Self-administere Questionnaire (d Paper-and-Pencil describe):				
Self-administere Questionnaire (

Other (describe):	
	Data on exposure to medications was collected from medical charts of
a	ll 38 patients who received IV medications at Oncology Clinic A
☐ Biological Specimen Sample	
Environmental Sample	
Other (describe):	
Response Rate (if applicable)	
Total No. Responded (A):	NA
Total No. Sampled/Eligible to Respond (B):	NA
Response Rate (A/B):	NA

Complete the following burden table. Each data collection instrument should be included as a separate row.

Burden Table (insert rows for additional respondent types if needed)

		No.	No. Responses	Burden per	Total Burden
Data Collection Instrument	Type of	Respondents	per Respondent	Response in	in Hours
Name	Respondent	(A)	(B)	Minutes (C)	$(A \times B \times C)/60*$
Medical Chart Abstraction	Federal Staff	2	19	0	0
Form					

Return completed form and a blank copy of each final data collection instrument within 5 business days of data collection completion to the EEI Information Collection Request Liaison, Danice Eaton (dhe0@cdc.gov).

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GenIC No.:	2016018-XXX			
EPI AID No. (if applicable):	2016-036			
Requesting entity (e.g., jurisdiction):	Mississippi State Department of Health (MSDH)			
Title of Investigation:	Undetermined source and risk factors for botulism among prisoners at a correctional facility — Mississippi, 2016			
Purpose of Investigation: (Use as much space as necessary)	On June 9, 2016, the MSDH notified the CDC botulism consultation service regarding a suspected outbreak of botulism at a single federal correctional institution. Preliminary information suggests that the affected inmates consumed homemade intoxicant, also known as hooch or pruno. The MSDH requested assistance with investigating the scope and identifying the source of the outbreak, determining risk factors for illness, and developing public health recommendations to prevent future outbreaks.			
Duration of Data Collection:	90 days			
Date Began:	6/13/2016			
Date Ended:	9/11/2016			
Lead Investigator				
Name:	Kevin Chatham-Stephens			
CIO/Division/Branch:	CDC/NCEZID/EDEB			
Type of Respondent ☐ General public ☐ Other (describe): Inm	☐ Healthcare staff ☐ Laboratory staff ☐ Patients ☐ Restaurant staff ates from the affected correctional facility who reported exposure to homemade intoxicant			
Data Collection Methods (check	k all that apply) indicate which type(s) below)			
Descriptive Stud	• • • • • • • • • • • • • • • • • • • •			
Cross-sectional Cohort Study (d Case-Control St Other (describe) Environmental Assessm Laboratory Testing (de Other (describe):	Study (describe): describe): udy (describe): ment (describe):			
Data Collection Mode (check a				
Survey Mode (indicate				
☐ Face-to-face Into	1			
Telephone Inter				
Self-administere Questionnaire (ed Paper-and-Pencil (describe):			

Self-administered Internet	
Questionnaire (describe): Other (describe):	
Medical Record Abstraction (describe):	
Biological Specimen Sample	
Environmental Sample	
Other (describe):	
Other (describe).	
Response Rate (if applicable)	
Total No. Responded (A):	
Total No. Sampled/Eligible to Respond (B): 34	ī
Response Rate (A/B): 97.1%	
Data Collection Instrument 2	
Name of Data Collection Instrument: Medical chart abstraction tool	
Type of Respondent	
☐ General public ☐ Healthcare staff ☐ Laboratory staff ☐ Patients ☐ Restaurant staff	
Other (describe): Medical charts abstracted by CDC and MSDH staff based on healthcare staff records	
Data Collection Methods (check all that apply)	
Epidemiologic Study (indicate which type(s) below)	
Descriptive Study (describe): Abstracted medical charts from the prison health services unit	
and hospitals for exposed inmates that reported signs and	
symptoms consistent with botulism during the interview.	
Abstracted data to identify exposures, describe signs and	
symptoms consistent with botulism, and assess risk factors	
for severe illness.	
Cross-sectional Study (describe):	
Cohort Study (describe):	
Case-Control Study (describe):	
Other (describe):	
Environmental Assessment (describe):	
Laboratory Testing (describe):	
Other (describe):	
Data Collection Mode (check all that apply)	
☐ Survey Mode (indicate which mode(s) below): ☐ Face-to-face Interview (describe):	
Telephone Interview (describe):	
Self-administered Paper-and-Pencil	
Questionnaire (describe):	
Self-administered Internet	
Questionnaire (describe):	
Other (describe):	
Medical Record Abstraction (describe): Copies of medical charts were reviewed using chart abstraction tool.	
Since patients were often transferred (up to four times) there were	
multiple charts to abstract for many of the patients.	

☐ Biological Specimen Sample ☐ Environmental Sample ☐ Other (describe):	
Response Rate (if applicable) Total No. Responded (A): Total No. Sampled/Eligible to Respond (B): Response Rate (A/B):	28 33 84% (note: only partial chart abstraction was possible for a some patients)
Data Collection Instrument 3 Name of Data Collection Instrument: Laborate Type of Respondent	ory test results
☐ General public ☐ Healthcare started ☐ Other (describe):	ff
	CDC routinely performed botulism testing on serum and stool for suspected cases of botulism in many states, including Mississippi and Oklahoma. As part of this investigation, CDC performed testing for the suspected cases in both states when requested by local health authorities.
Data Collection Mode (check all that apply) Survey Mode (indicate which mode(s) be Face-to-face Interview (describe): Telephone Interview (describe): Self-administered Paper-and-Penc Questionnaire (describe): Self-administered Internet Questionnaire (describe): Other (describe): Medical Record Abstraction (describe): Biological Specimen Sample Environmental Sample	
Response Rate (if applicable) Total No. Responded (A):	28

Total No. Sampled/Eligible to Respond (B):	33
Response Rate (A/B):	84%

(Additional Data Collection Instrument sections may be added if necessary.)

Complete the following burden table. Each data collection instrument should be included as a separate row.

Burden Table (insert rows for additional respondent types if needed)

		No.	No. Responses	Burden per	Total Burden
Data Collection Instrument	Type of	Respondents	per Respondent	Response in	in Hours
Name	Respondent	(A)	(B)	Minutes (C)	$(A \times B \times C)/60*$
Interview Questionnaire	Inmates	33	1	30	17
Medical Chart Abstraction	Federal staff	0	0	0	0
Medical Chart Abstraction	State staff	4	5	30	10

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GenIC No.:	2016019-XXX				
EPI AID No. (if applicable):	2016-038				
Requesting entity (e.g., jurisdiction):	Wisconsin Division of Public Health				
Title of Investigation:	Undetermined source of Elizabethkingia anophelis infections among Wisconsin residents — Wisconsin, 2016				
as much space as necessary)	Elizabethkingia anophelis is a rare, gram-negative bacillus identified in 2011 that is intrinsically multidrug-resistant, resulting in high mortality rates ranging from 23 to 52%. Although most E. anophelis infections have occurred in healthcare settings, community-acquired infections have also been reported.				
	On January 5, 2016, the Centers for Disease Control and Prevention (CDC) was notified by the Wisconsin Division of Public Health (WDPH) of an outbreak of E. anophelis infections. A joint CDC-WDPH investigation identified 66 cases of primarily community-associated infections, all occurring in southeastern Wisconsin, northeastern Illinois, and western Michigan. Specimen collection dates ranged from November 23, 2015 to May 30, 2016 and the epidemiologic curve seemed to indicate a point source for the infection. Patients have a variety of healthcare-associated and community-associated exposures, as well as co-morbidities. Hypothesis-generating interviews, structured interviews, and environmental sampling did not demonstrate a clear food or water source personal care product, healthcare product, or healthcare setting as a point source. Although the number of reported cases is decreasing, the number of reported persons with infection in the last quarter was 9 and still well above the baseline of 3-5 reported per year. Identifying a potential point source of infections is critical to prevention of new infections and may inform future community-associated E. anophelis outbreaks. Group ethnographic interviews with small subclusters of patients may identify a common, shared exposure missed by traditional outbreak investigation approaches. WDPH requested CDC assistance with: 1) identification of potential exposures though group ethnographic interviews and 2) application of findings from activity 1 to identify				
	prevention and control measures. 10 days				
·	7/18/2016				
0					
	7/27/2016				
Lead Investigator	01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	Sharoda Dasgupta				
CIO/Division/Branch:	NCHHSTP/DHAP/HICSB				
Complete the following for eac Data Collection Instrument 1	<u>ch</u> instrument used during the investigation.				
Name of Data Collection Instru	ment: Ethnographic interview guide				
Type of Respondent					
General public	☐ Healthcare staff ☐ Laboratory staff ☐ Patients ☐ Restaurant staff				
Other (describe):					
Data Collection Methods (check	ndicate which type(s) below) y (describe): Study (describe):				

Case-Control Study (describe):	
Other (describe):	
Environmental Assessment (describe):	
Laboratory Testing (describe):	
	Open-ended, hypothesis-generating ethnographic interviews
<u> </u>	conducted both in group (in-person) and individual settings (by phone)
Data Collection Mode (check all that apply)	
<u> </u>	1,).
✓ Survey Mode (indicate which mode(s) be✓ Face-to-face Interview (describe):	
☐ Face-to-race interview (describe):	Group ethnographic in-person interviews In-depth individual phone interviews with eligible persons who
relephone interview (describe):	could not meet for a group ethnographic in-person interview
Self-administered Paper-and-Penc	
Questionnaire (describe):	
Self-administered Internet	
Questionnaire (describe):	
Other (describe):	
Medical Record Abstraction (describe):	
Biological Specimen Sample	
Environmental Sample	
Other (describe):	
Response Rate (if applicable)	
Total No. Responded (A):	9
Total No. Sampled/Eligible to Respond (B):	22
Response Rate (A/B):	9/22 = 41%
Data Collection Instrument 2	
•	enterics questionnaire
Type of Respondent	
General public Healthcare sta	ff
Other (describe):	
Data Collection Methods (check all that apply)	
Epidemiologic Study (indicate which typ	e(s) below)
Descriptive Study (describe):	
Cross-sectional Study (describe):	
Cohort Study (describe):	
Case-Control Study (describe):	
Other (describe):	
Environmental Assessment (describe):	
Laboratory Testing (describe):	
	Structured phone interviews to evaluate exposure to special order ruits or nuts from delivery trucks or local fundraisers
L	Tuits of fluts from derivery trucks of focal fundraisers
Data Collection Mode (check all that apply)	

Data Collection Mode (check all that apply)

Survey Mode (indicate which mode(s) bel	ow):
☐ Face-to-face Interview (describe):	
☐ Telephone Interview (describe):	Telephone interviews conducted with a convenience sample of patients to evaluate exposure to special order fruits or nuts from delivery trucks or local fundraisers
Self-administered Paper-and-Penci Questionnaire (describe):	
Self-administered InternetQuestionnaire (describe):	
Other (describe):	
☐ Medical Record Abstraction (describe):	
☐ Biological Specimen Sample	
Environmental Sample	
Other (describe):	
Response Rate (if applicable)	
Total No. Responded (A):	7
Total No. Sampled/Eligible to Respond (B):	22
Response Rate (A/B):	7/22 = 32%

Complete the following burden table. Each data collection instrument should be included as a separate row.

Burden Table (insert rows for additional respondent types if needed)

		No.	No. Responses	Burden per	Total Burden
Data Collection Instrument	Type of	Respondents	per Respondent	Response in	in Hours
Name	Respondent	(A)	(B)	Minutes (C)	(A x B x C)/60*
Ethnographic interview	Patient	9	1	120	18
guide					
Detailed enterics	Patient	7	1	60	7
questionnaire					

Return completed form and a blank copy of each final data collection instrument within 5 business days of data collection completion to the EEI Information Collection Request Liaison, Danice Eaton (dhe0@cdc.gov).

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GenIC No.:	2016020				
EPI AID No. (if applicable):					
Requesting entity (e.g., jurisdiction):	Utah Department of Public Health				
Title of Investigation:	Undetermined Mode of Transmission Zika Virus among Utah Community Members, 2016				
Purpose of Investigation: (Uas much space as necessary)	On July 1st, an adult male family contact reported developing a subjective fever and then progressed to develop a rash and conjunctivitis. The family contact had no history of travel or sexual contact with someone who traveled, but had been in contact with the index patient during his period of viremia. Testing of urine obtained 7 days after illness onset for the family contact was positive for Zika viral RNA at the Utah State Public Health Laboratory. Because the family contact did not report travel to a Zika-affected area or sexual contact with anyone who had recently traveled to a Zika-affected area, there is concern about local transmission through a potentially unidentified mode of transmission or by local mosquito-borne transmission. The team performed enhanced surveillance of community members residing within 200 meter radius of the properties of interest for evidence of recent Zika virus				
	infection/disease. Community members were surveyed about potential exposures and asked to provide a blood sample for Zika testing.				
Duration of Data Collection					
Date Began:					
Date Ended:					
Lead Investigator					
Name:	Erin Staples				
CIO/Division/Branch:	CDC/ DVBD/ADB				
Data Collection Instrumen Name of Data Collection Ins					
Type of Respondent					
☐ General public	☐ Healthcare staff ☐ Laboratory staff ☐ Patients ☐ Restaurant staff				
Other (describe):					
☐ Descriptive S ☐ Cross-section ☐ Cohort Study	/ (indicate which type(s) below) tudy (describe): al Study (describe): (describe): Study (describe): be): ssment (describe):				
Other (describe):					
Data Collection Mode (chec	k all that apply)				
Survey Mode (indica	ate which mode(s) below):				
	Interview (describe): Households within the 200 meter radius were visited by				
	ricer (desertise): Trousenoids within the 200 meter radius were visited of				

	investigation teams consisting of an interviewer, a phlebotomist, and a person familiar with the location, either an employee of the local
	health department or other government employee.
☐ Telephone Interview (describe):	
Self-administered Paper-and-Penci Questionnaire (describe):	
Self-administered Internet Questionnaire (describe):	
Other (describe):	
☐ Medical Record Abstraction (describe):	
☐ Biological Specimen Sample	
Environmental Sample	
Other (describe):	
Response Rate (if applicable)	
Total No. Responded (A):	
Total No. Sampled/Eligible to Respond (B):	
Response Rate (A/B):	

Complete the following burden table. Each data collection instrument should be included as a separate row.

Burden Table (insert rows for additional respondent types if needed)

		No.	No. Responses	Burden per	Total Burden
Data Collection Instrument	Type of	Respondents	per Respondent	Response in	in Hours
Name	Respondent	(A)	(B)	Minutes (C)	$(A \times B \times C)/60*$
Community Investigation	General	209	1	10	35
Questionnaire	public				

Return completed form and a blank copy of each final data collection instrument within 5 business days of data collection completion to the EEI Information Collection Request Liaison, Danice Eaton (dhe0@cdc.gov).

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GenIC No.:	2016021				
EPI AID No. (if applicable):					
Requesting entity (e.g., jurisdiction):					
Title of Investigation:	Healthcare Personnel Risk Assessment Questionnaire and Serosurvey for Zika Virus Exposure—Utah, 2016				
Purpose of Investigation: (Use as much space as necessary)	On July 1st, an adult male family contact reported developing a subjective fever and then progressed to develop a rash and conjunctivitis. The family contact had no history of travel or sexual contact with someone who traveled, but had been in contact with the index patient during his period of viremia. Testing of urine obtained 7 days after illness onset for the family contact was positive for Zika viral RNA at the Utah State Public Health Laboratory. Because the family contact did not report travel to a Zika-affected area or sexual contact with anyone who had recently traveled to a Zika-affected area, there is concern about local transmission through a potentially unidentified mode of transmission or by local mosquito-borne transmission. The team performed enhanced surveillance of the Health care providers (HCP) involved in the care of the deceased patient. This surveillance included a detailed risk assessment questionnaire and, for those determined to have had significant direct contact with the				
Duration of Data Collection:	patient, blood draws to test for the presence of Zika IgM antibody.				
Date Began:					
Date Ended:					
Lead Investigator					
Name:	Bryan Christensen				
CIO/Division/Branch:	CDC/ DHQP/OD				
Complete the following for ea Data Collection Instrument 1 Name of Data Collection Instru					
Type of Respondent					
General public	☐ Healthcare staff ☐ Laboratory staff ☐ Patients ☐ Restaurant staff				
Other (describe):					
Descriptive Stude Cross-sectional Cohort Study (d Case-Control St Other (describe) Environmental Assessm Laboratory Testing (de Other (describe):	ndicate which type(s) below) ly (describe): Study (describe): escribe): udy (describe): : nent (describe): scribe): seroprevalence survey with matched cohort				
Data Collection Mode (check a ⊠ Survey Mode (indicate	••				

☐ Face-to-face Interview (describe):	Investigators administered a detailed questionnaire to determine the
	level of contact each identified healthcare worker had with the
	deceased patient. Information collected included type of contact,
	type of care provided, exposure to blood or body fluids, and use of
	PPE during care. We also collected relevant information on the
	employee's history, including recent travel, vaccinations, and
	pregnancy status.
Telephone Interview (describe):	
Self-administered Paper-and-Pencil	
Questionnaire (describe):	
Self-administered Internet	
Questionnaire (describe):	
Other (describe):	
☐ Medical Record Abstraction (describe):	
Biological Specimen Sample	
Environmental Sample	
Other (describe):	
Response Rate (if applicable)	
Total No. Responded (A):	
Total No. Sampled/Eligible to Respond (B):	
Response Rate (A/B):	

Complete the following burden table. Each data collection instrument should be included as a separate row.

Burden Table (insert rows for additional respondent types if needed)

		No.	No. Responses	Burden per	Total Burden
Data Collection Instrument	Type of	Respondents	per Respondent	Response in	in Hours
Name	Respondent	(A)	(B)	Minutes (C)	$(A \times B \times C)/60*$
Health Care Worker	Healthcare	96	1	10	32
Assessment-Cases	Worker				
Health Care Worker	Healthcare	113	1	3	6
Assessment-Controls	Worker				

Return completed form and a blank copy of each final data collection instrument within 5 business days of data collection completion to the EEI Information Collection Request Liaison, Danice Eaton (dhe0@cdc.gov).

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GenIC No.:	2016022-XXX			
EPI AID No. (if applicable):	2016-046			
Requesting entity (e.g., jurisdiction):	Hawaii State Departm	nent of Health		
Title of Investigation:	Undetermined source Hawaii, 2016.	and risk factors for Hepatitis A virus (HAV) outbreak —		
Purpose of Investigation: (Use as much space as necessary)	The objectives of the investigation included: providing epidemiologic support to better elucidate the possible implication of restaurants involved in HAV transmission during the current outbreak, assistance in a case re-analysis to obtain more definitive epidemiologic evidence for suspect food items, facilitate product traceback through data collection and analysis, facilitate clinical review of case data to better understand the potential health impacts suffered by infected persons.			
Duration of Data Collection:	5 days			
Date Began:	August 22, 2016			
Date Ended:	August 26, 2016			
Lead Investigator				
Name:	Monique Foster, MD			
CIO/Division/Branch:	NCHHSTP/Division	of Viral Hepatitis/Epidemiology and Surveillance Branch		
Complete the following for ea Data Collection Instrument 1				
Name of Data Collection Instru	ment: Hepauus A:	Supplemental Case Questionnaire		
Type of Respondent				
☐ General public	Healthcare staff	Laboratory staff Patients Restaurant staff		
Other (describe):				
Data Collection Methods (chec Epidemiologic Study (i	indicate which type(s)	Cases who did not initially report exposure to the implicated restaurant or food item were re-contacted to better elucidate their		
		true exposures to a source of the outbreak.		
	Study (describe):			
Cohort Study (d	·			
Case-Control St	• •			
Other (describe)				
Environmental Assessr				
Laboratory Testing (de	scribe):			
Other (describe):				
Data Collection Mode (check a	ll that apply)			
Survey Mode (indicate	which mode(s) below):		
☐ Face-to-face Int	erview (describe):			
☐ Telephone Inter		Cases who did not initially report exposure to the implicated restaurant or food item were contacted via telephone and then the accompanying questionnaire was completed by trained interviewers.		
Self-administere	ed Paper-and-Pencil			

Questionnaire (describe):	
Self-administered Internet	
Questionnaire (describe):	
Other (describe):	
☐ Medical Record Abstraction (describe):	
☐ Biological Specimen Sample	
Environmental Sample	
Other (describe):	
Response Rate (if applicable)	
Total No. Responded (A):	47
Total No. Sampled/Eligible to Respond (B):	103
Response Rate (A/B):	46%

Complete the following burden table. Each data collection instrument should be included as a separate row.

Burden Table (insert rows for additional respondent types if needed)

		No.	No. Responses	Burden per	Total Burden
Data Collection Instrument	Type of	Respondents	per Respondent	Response in	in Hours
Name	Respondent	(A)	(B)	Minutes (C)	(A x B x C)/60*
Hepatitis A: Supplemental	General	47	1	5	4
Case Questionnaire	Public				

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GenIC No.:

2016023-XXX

EPI AID No. (if applicable):

2016-049

Requesting entity (e.g.,

South Carolina Department of Health and Environmental Control

jurisdiction):

*

Title of Investigation:

Undetermined source for *Salmonella* Infantis infections among detention center inmates — South Carolina, 2016

Purpose of Investigation: (Use as much space as necessary)

On July 27, 2016, the South Carolina Department of Health and Environmental Control notified CDC of a cluster of illnesses with isolates matching a rare, emerging strain of Salmonella Infantis, defined by the PFGE pattern JFXX01.0787. Salmonella Infantis is known to cause long-term, asymptomatic infections. It also causes more severe infections than other common Salmonella serotypes.

The South Carolina cluster includes four isolates that matched a multistate outbreak strain that CDC is currently investigating. The four isolates were from inmates in a county detention center that reported 131 cases of gastrointestinal illness. Illness onset began on July 12, with the majority of cases reported within 24 hours. The source of the infection among this cluster is currently unknown.

This Salmonella Infantis strain is of particular public health interest because previous isolates matching this PFGE pattern have been found to contain a large, mobile plasmid containing a CTX-M-65 type extended-spectrum beta-lactamase, as well as resistance to 9-10 other drugs. Together, this strain has been resistant to ampicillin, ceftriaxone, chloramphenicol, sulfisoxazole, tetracycline, nalidixic acid, and trimethoprim/sulfamethoxazole and had intermediate susceptibility to ciprofloxacin and gentamicin and is associated with more severe illness.

Phylogenetic analysis revealed that clinical isolates from this cluster group closely with the previous isolates characterized, as well as a CTX-M-65-positive isolate from retail chicken. This evidence indicate that infections may be associated with consumption of chicken meat. Due to frequent association of this strain with a clinically important multidrug resistance, the epidemic potential of the MDR plasmid, and the potential association with chicken, an urgent public health response is warranted.

The purpose of the investigation was to

- 1) Describe the extent of the cluster of gastroenteritis among detention center inmates.
- 2) Assess exposures and risk factors for acquisition of Salmonella Infantis infection.
- 3) Describe the clinical course of illness of affected patients including severity of infection, treatment and outcomes.
- 4) Determine if persons previously reporting illness are currently shedding Salmonella Infantis PFGE pattern, JFXX01.0787.
- 5) Based on findings of the investigation, recommend measures to reduce inmate risk and for ongoing surveillance.

Duration of Data Collection:

Date Began:

8/16/16

Date Ended:

8/26/16

Lead Investigator

Name:

Sarah Luna

CIO/Division/Branch:

NCEZID/DFWED/EDEB

Complete the following for <u>each</u> instrument used during the investigation. Data Collection Instrument 1

Name of Data Collection Instrument: Case Interv Type of Respondent	iew Form
General public Healthcare staff	☐ Laboratory staff ☐ Patients ☐ Restaurant staff
X Other (describe): Detention center detained	S
Data Collection Methods (check all that apply)	
☐ Epidemiologic Study (indicate which type(s) ☐ Descriptive Study (describe):	below)
Cross-sectional Study (describe):	
X Cohort Study (describe):	Demographic and clinical characteristics, food exposures, medication exposures and medical history of inmates at the detention center during the outbreak was collected
X Case-Control Study (describe):	Food exposures associated with illness was collected
Other (describe): Environmental Assessment (describe):	
Laboratory Testing (describe):	
Other (describe):	
Data Collection Mode (check all that apply) Survey Mode (indicate which mode(s) below X Face-to-face Interview (describe): Telephone Interview (describe): Self-administered Paper-and-Pencil Questionnaire (describe): Self-administered Internet Questionnaire (describe): Other (describe): Medical Record Abstraction (describe): Biological Specimen Sample Environmental Sample Other (describe):	Individual interviews with persons who reported illness during the outbreak.
Response Rate (if applicable)	
Total No. Responded (A): Total No. Sampled/Eligible to Respond (B): 81	
Response Rate (A/B):	
Data Collection Instrument 2	
· · · · · · · · · · · · · · · · · · ·	ening and Interview Form
Type of Respondent	_
General public Healthcare staff	Laboratory staff Patients Restaurant staff
X Other (describe): Detention center detained	S
Data Collection Methods (check all that apply) [Epidemiologic Study (indicate which type(s))	below)

☐ Descriptive Study (describe): ☐ Cross-sectional Study (describe): X☐ Cohort Study (describe):	Demographic and clinical characteristics, food exposures, medication exposures and medical history of inmates at the detention center during the outbreak was collected
X Case-Control Study (describe): Other (describe):	Food exposures associated with illness was collected
☐ Environmental Assessment (describe):☐ Laboratory Testing (describe):☐ Other (describe):	
Data Collection Mode (check all that apply)	
☐ Survey Mode (indicate which mode(s) be X☐ Face-to-face Interview (describe	
☐ Telephone Interview (describe): ☐ Self-administered Paper-and-Penc Questionnaire (describe):	
☐ Self-administered Internet Questionnaire (describe): ☐ Other (describe):	
☐ Medical Record Abstraction (describe): ☐ Biological Specimen Sample ☐	
☐ Environmental Sample ☐ Other (describe):	
Response Rate (if applicable)	
Total No. Responded (A):	159
Total No. Sampled/Eligible to Respond (B):	267
Response Rate (A/B):	0.60

(Additional Data Collection Instrument sections may be added if necessary.)

Complete the following burden table. Each data collection instrument should be included as a separate row.

Burden Table (insert rows for additional respondent types if needed)

		No.	No. Responses	Burden per	Total Burden
Data Collection Instrument	Type of	Respondents	per Respondent	Response in	in Hours
Name	Respondent	(A)	(B)	Minutes (C)	$(A \times B \times C)/60*$
Case Interview Form	Person	66	1	45	50
Control Screening and	Person	159	1	30	80
Interview Form					

Return completed form and a blank copy of each final data collection instrument within 5 business days of data collection completion to the EEI Information Collection Request Liaison, Danice Eaton (dhe0@cdc.gov).

EEI Information Collection Request Liaison:

Danice Eaton, PhD, MPH
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Epidemiology Workforce Branch
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