


Cruise Ship Enhanced Data Collection During COVID-19 Pandemic

PID 305


Actions:

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CS COVID EDC

Invitation status: 

 Survey options ▾

 Editing existing Record ID **1322**

Record ID

1322

To rename the record, see the record action drop-down at top of the [Record Home Page](#).



****Please submit every Monday by 0900 EDT****

OMB Approved
Control No. 0920-0134
Exp. 3/31/2022

Directions: Enter new cases diagnosed from Monday 0000 EDT to Sunday 2359 EDT for each category as defined below.




Ship:

* must provide value

Date Submitted:

* must provide value

  Today M-D-Y
 Please submit every Monday by 0900 EDT.

Total # of crew members onboard:

* must provide value



Closest seaport at time of submission (City):

* must provide value



Closest seaport at time of submission (Country):

* must provide value



Symptomatic Case Counts and Diagnostic Testing:

Please ensure these counts are independent of each other (i.e., crew member is not listed as an ILI and a pneumonia case).

Enter Numbers Below (Unless Otherwise specified)

What is your ARI case count for the specified time period?

* must provide value



Acute Respiratory Illness (ARI) is defined as the presence of cough, sore throat, or rhinorrhea in the absence of fever and in the absence of a non-infectious diagnosis as determined by the ship's medical provider (e.g., allergies)

What is your ILI case count for the specified time period?

* must provide value



Influenza-like Illness (ILI) is defined as fever (100.4 °F [38 °C]) plus either cough or sore throat in the absence of another diagnosis.

What is your pneumonia case count for the specified time period?

* must provide value



What is your Additional COVID-19-Like Illness (aCLI) case count for the specified time period?

* must provide value



NOTE: If a person meets criteria for ARI, ILI, or pneumonia, please do not include them in this section.

Additional COVID-19-Like Illness (aCLI) criteria: 1) At least TWO or more of the following symptoms: chills, rigors, muscle or body aches (myalgias), headache, fatigue, nasal congestion, vomiting, or diarrhea, OR 2) At least ONE or more of the following symptoms: fever (without meeting ILI criteria or pneumonia diagnosis above), new loss of taste or smell, shortness of breath, or difficulty breathing

How many symptomatic persons were tested for influenza via rapid diagnostic test?

* must provide value



1

Of the symptomatic persons tested for influenza via rapid diagnostic test, how many tested positive?

* must provide value



How many symptomatic persons were tested for COVID-19 via PCR test?

* must provide value



1

Note: Do not include *asymptomatic* persons tested for routine screening or disembarkation and/or repatriation - see question below

Of the symptomatic persons tested for COVID-19 via PCR test, how many tested positive?

* must provide value



Of the symptomatic persons tested for COVID-19 via PCR test, how many have pending results?

* must provide value



Of the symptomatic persons tested for COVID-19 via PCR test who had pending results on the previous EDC submission, how many of those were positive?

* must provide value



How many symptomatic persons were tested for COVID-19 via rapid antigen test?

* must provide value



1



Note: Do not include *asymptomatic* persons tested for routine screening or disembarkation and/or repatriation - see question below

Of the symptomatic persons tested for COVID-19 via rapid antigen test, how many tested positive?

* must provide value



What brand of test was used?



How many symptomatic persons were tested for antibodies to coronavirus or COVID-19 via rapid serology* test?

* must provide value



1



Note: Do not include *asymptomatic* persons tested for routine screening or disembarkation and/or repatriation - see question below

Of the symptomatic persons tested for antibodies to coronavirus or COVID-19 via rapid serology* test, how many tested positive?

* must provide value



What brand of test was used?



How many symptomatic persons needed hospitalization?

* must provide value



1



Of those hospitalized, how many required mechanical ventilation?

* must provide value



Of those hospitalized, how many were medically evacuated from the ship?

* must provide value



Asymptomatic Case Counts and Diagnostic Testing:

Enter numbers below (unless otherwise specified)

How many *asymptomatic* persons were tested for COVID-19 via PCR test for routine screening or disembarkation and/or repatriation?

* must provide value

Note: This includes testing (a) while onboard, (b) within 48 hours after disembarking, and (c) between 48 hours - 7 days after disembarking

Of the *asymptomatic* persons tested for COVID-19 via PCR test for routine screening or disembarkation and/or repatriation, how many tested positive?

* must provide value

Note: Any **positive** test results from crew members who were tested between **48 hours - 7 days** after disembarking the ship should be reported to CDC by email (without personally identifiable information (PII)) to eocevent349@cdc.gov not via EDC**

Of the *asymptomatic* persons tested for COVID-19 via PCR test for routine screening or disembarkation and/or repatriation, how many have pending results?

* must provide value

Of the *asymptomatic* persons tested for COVID-19 via PCR test for routine screening or disembarkation and/or repatriation with pending results on the previous EDC submission, how many of those were positive?

* must provide value

Note: Any **positive** test results from crew members who were tested between **48 hours - 7 days** after disembarking the ship should be reported to CDC by email (without personally identifiable information (PII)) to eocevent349@cdc.gov not via EDC**

How many *asymptomatic* persons were tested for COVID-19 via rapid antigen test for routine screening or disembarkation and/or repatriation?

* must provide value



1



Note: This includes testing (a) while onboard, (b) within 48 hours after disembarking, and (c) between 48 hours - 7 days after disembarking

Of the *asymptomatic* persons tested for COVID-19 via rapid antigen test for routine screening or disembarkation and/or repatriation, how many tested positive?

* must provide value



Note: Any **positive** test results from crew members who were tested between **48 hours - 7 days** after disembarking the ship should be reported to CDC by email (without personally identifiable information (PII)) to eocevent349@cdc.gov not via EDC**

What brand of test was used



How many *asymptomatic* persons were tested for antibodies to coronavirus or COVID-19 via rapid serology* test for routine screening or disembarkation and/or repatriation?

* must provide value



1



Note: This includes testing (a) while onboard, (b) within 48 hours after disembarking, and (c) between 48 hours - 7 days after disembarking

Of the *asymptomatic* persons tested for antibodies to coronavirus or COVID-19 via rapid serology* test for routine screening or disembarkation and/or repatriation, how many tested positive?



What brand of test was used?



Isolation Practices

Were persons with ARI, ILI, pneumonia, or additional CLI symptoms isolated for COVID-19 per CDC guidelines?[‡]

* must provide value

Yes

No

reset



Persons with ILI, ARI, pneumonia or additional CLI symptoms should be isolated using the same guidelines as a confirmed COVID-19 case. Isolation may be discontinued for symptomatic crew with suspected or confirmed COVID-19 under conditions outlined at: www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html

Please explain.



*CDC does not recommend the use of antibody testing to diagnose or screen for active COVID-19 infections, and FDA has not authorized antibody testing for diagnostic purposes.

** CDC will evaluate these positive results and may request additional information to determine if they should be included in the EDC case counts.

[‡] Persons with ILI, ARI, pneumonia, or additional CLI symptoms should be isolated using the same guidelines as a confirmed COVID-19 case.

Isolation may be discontinued for symptomatic crew with suspected or confirmed COVID-19 under conditions outlined at: www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html

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 Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA 0920-0132.

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