
REPORT OF DISEASE OUTBREAK

STATE COUNTY CITY OR TOWN

TYPE OF DISEASE OUTBREAK NAME OF COMMUNITY, CAMP, INSTITUTION POPULATION

PROBABLE MODE OF SPREAD

DATE OF ONSET INCUBATION PERIOD (*Hours or days*)

FIRST CASE LAST CASE

NUMBER OF CASES REPORTED NUMBER OF DEATHS

CASES INVESTIGATED EPIDEMIOLOGICALLY

NUMBER

CASES CONFIRMED BY LABORATORY EXAMINATION

CASES WHICH CONTACTED A SUSPECTED VEHICLE

PERSONS EXPOSED TO A SUSPECTED VEHICLE⁽¹⁾

IF THIS WAS A COMMON SOURCE OUTBREAK INDICATE TYPE OF VEHICLE OTHER FOOD (*State kind*)

MILK ICE CREAM OTHER DAIRY PRODUCT _____ SHELLFISH WATER UNIDENTIFIED

HOW WAS VEHICLE INFECTED? IF WATER-BORNE, TYPE OF SUPPLY KIND OF TREATMENT

IF MILK-BORNE, WAS DAIRY PRODUCT PASTEURIZED? GRADE IF SHELLFISH, WAS THERE CONTAMINATION IN
 YES NO NATURAL GROWING AREAS FLOATS OTHERWISE

REPORT OF LABORATORY FINDINGS (*State type of specimen examined and specific type of organism found*)

NAME OF POSITION OF INVESTIGATOR AGENCY

NARRATIVE REPORT (*Supplementary narrative report is requested for all outbreaks, including clinical symptoms, age distribution of cases if pertinent, etc.*)

(Use reverse side if necessary)

REPORT APPROVED BY (*Name and Title*)

DATE

(1) If necessary, estimate the probable number. In the case of public water supplies use the percentage of homes connected. In the case of milk supplies use the percentage of the total milk supplies represented by the incriminated supply. In the case of ice cream or food attempt to secure estimate from distributor of total number of customers.