



Gastrointestinal Illness Outbreak 24 Hour Case Listing Report

Fax daily updates by 10:00 am to Public Health at **780.735.1801** and
 SL, HL/SL shared sites fax to 780.735.3389 HL only sites fax to appropriate HL Network Office
 Submit report daily for both Newly Symptomatic cases, and when no new cases have been
 identified. Do not include Relapse Cases on this listing

EI (Outbreak) Number
Report Start Date (<i>dd-Mon-yyyy</i>) 0700 am
Report End Date (<i>dd-Mon-yyyy</i>) 0700 am
<input type="checkbox"/> There have been no new cases in this time period <input type="checkbox"/> This report contains newly symptomatic cases

Facility Name/Unit	Contact person at Facility	Facility Phone Number
--------------------	----------------------------	-----------------------

Newly symptomatic Residents in the past 48 hours? Yes No → If No, contact Public Health to discuss lifting of Outbreak restrictions

Number of newly symptomatic Residents in the last 24 hours _____	Cumulative Number of symptomatic Residents since start of outbreak _____
Number of newly symptomatic Staff in the last 24 hours _____	Cumulative Number of symptomatic Staff since start of outbreak _____

Demographic Information (<i>Residents only, Do not include Staff Demographics</i>)					Signs and Symptoms			Lab Work		
Last Name, First Name	PHN/ULI	Date of Birth (<i>dd-Mon-yyyy</i>)	Gender M/F	Unit/ Wing	Onset Date (<i>dd-Mon-yyyy</i>)	Onset Time (<i>hh:mm</i>)	Check all that apply			Date stool specimen collected (<i>dd-Mon-yyyy</i>)
							Diarrhea	Vomiting	Other	

Outcome - Update on Hospitalizations or Deaths of Above or Previously Reported Ill Residents								
Last Name, First Name	PHN/ULI	Date of Birth (<i>dd-Mon-yyyy</i>)	Gender M/F	Unit/ Wing	Name of Hospital	Date Admitted (<i>dd-Mon-yyyy</i>)	Cause of Death	Date of Death (<i>dd-Mon-yyyy</i>)

Gastrointestinal Illness Outbreak Case Listing Guidelines

Case Definition for Gastroenteritis

At least **one** of the following criteria must be met, and not be attributable to another cause (e.g. *Clostridium difficile* diarrhea, medication, laxatives, diet or prior medical condition etc.)

- 2 or more episodes of diarrhea (e.g. loose or watery stools) in a 24 hour period, above what is normally expected for that individual
- 2 or more episodes of vomiting in a 24 hour period
- 1 episode of vomiting **and** diarrhea in a 24 hour period
- Positive stool culture of a known enteric pathogen and at least one symptom compatible with a gastrointestinal infection (e.g. *Nausea, vomiting, diarrhea, abdominal pain or tenderness*)
- 1 episode of bloody diarrhea

How to complete a Case Listing during an Outbreak

1. The first case listing submitted should include the details for **all** cases identified since the onset of the outbreak. Subsequent case listings should include only new GI cases that meet the definition for the previous 24 hour period. (*Reporting period is between 0700 am the previous day to 0700 am the day the report is submitted*). Relapse cases (*as defined in the manual*) should not be included on daily case listings.
2. If there have been no new cases in more than 48 hours, indicate on case listing form, fax to Public Health and then call Public Health pager 780.445.7226 to discuss lifting of GI restrictions.
3. Complete the case listing record. Include:
 - EI (Outbreak) Number
 - Dates of reporting period
 - Indicate if the report contains newly symptomatic cases, or if there have been no new cases within the time period
 - Facility Name
 - Contact information for Facility
 - Record number of newly symptomatic Residents and newly symptomatic Staff
 - Record cumulative number of symptomatic Residents and symptomatic Staff
 - Complete Demographics, Signs and Symptoms, Lab work and Vaccine information for Residents only. (Do not include this information for staff cases)
 - Include information or updates regarding related hospitalizations and/or deaths on any residents reported or previously reported.
4. Fax the daily case listing to Public Health by 1000 AM every day, including weekends and holidays for as long as the outbreak is ongoing. (Please ensure that the fax has been sent successfully e.g. obtain a 'confirmation of transmission' record from your fax machine).
5. SL, HL/SL shared sites must fax a copy to 780-735-3389 and HL only sites must fax a copy to the appropriate HL Network office.
6. Discontinue daily faxing of case listings when it has been confirmed (by telephone) with Public Health that the outbreak is closed. Any new cases identified after restrictions have been lifted should be reported and discussed with Public Health before completing a new case listing form.