



ACUTE RESPIRATORY ILLNESS OUTBREAK

Non-Healthcare Associated Settings

Acute Communicable Disease Control
313 N Figueroa St, Rm. 212
Los Angeles, CA 90012
Phone: (213) 240-7941
Fax: (213) 482-4856



CONTACT INFORMATION

Facility name		OB number:	
Street	City	CA	Zip
Primary Contact	Phone number	E-mail	

OUTBREAK TYPE AND SETTING

If non-healthcare institutional setting, specify: Assisted living Detention center Other:

- Influenza outbreak:** At least one case of laboratory-confirmed influenza in the setting of a cluster (≥ 2 cases) of influenza-like illness (ILI)* within a 72-hour period.
- Non-influenza outbreak of known etiology:** At least one case of a laboratory-confirmed respiratory pathogen, other than influenza, in the setting of a cluster (≥ 2 cases) of acute respiratory illness (ARI) † within a 72-hour period. **Pathogen:** _____
- Respiratory outbreak of unknown etiology:** A sudden increase of ARI† cases over the known background rate in the absence of a known etiology.

If non-institutional community congregate setting

- School/daycare:** (At least 10% of average daily attendance absent with ARI sustained over a 3-day period; OR 20% of an epidemiologically- linked group such as a single classroom, sports team, or after-school group) ill with similar symptoms, with a minimum of 5 ill, sustained over a 3-day period.
- Other** community setting not otherwise specified e.g., workplace : _____

DESCRIPTIVE INFORMATION

Case definition:

Any person with ILI* / ARI † between _____ (start date) and _____ (end date)
in _____ (e.g classroom, wing, floor) at the facility named above.

Total number at risk:		Number that met case definition:	
At risk residents/students:		Cases in residents/students:	
At risk staff:		Cases in staff:	

Age range: _____ to _____ years	Date of first onset: ____/____/____	Date last onset: ____/____/____
Median age: _____ yrs Female: _____%		

Symptoms reported by majority of cases:

- Fever (100°F/37.8°C or greater)
- Cough
- Muscle aches
- Sore throat
- Other: _____

Number of cases that met case definition with fever: _____	Highest recorded temperature: _____
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Number with Pneumonia: _____	Number with abnormal chest x-ray: _____
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Number hospitalized: _____	Number ICU: _____	Number died: _____
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LABORATORY INFORMATION

SPECIMENS				RESULTS	
Type	No of patients	Date collected	Type of test	Number positive	Pathogen

Laboratory name: _____

CONTROL MEASURES

Check all control measure taken in response to the outbreak

- Isolation/home restriction of symptomatic patients
- Antiviral prophylaxis offered to household members and/or other contacts
- Facility temporarily closed to new admissions
- Facility temporarily closed to visitors
- Staff cohorted to specific patients or areas
- Ill resident activity restrictions (e.g. remain in room)
- Increased education on respiratory and hand hygiene

- Medical interventions (describe): _____

- Environmental measure (describe): _____

- Other measures (describe): _____

REMARKS

Include line list. Include map, epidemic curve, laboratory results and other associated documents if available.

**ILI is defined as a fever ($\geq 100^{\circ}\text{F}$ or 37.8°C) plus cough and/or sore throat, in the absence of a known cause other than influenza. Person with ILI often have fever or feverishness with cough, chills, headache, myalgia, sore throat, or runny nose. Some persons, such as the elderly, children with neuromuscular disorders, and young infants may have atypical clinical presentations, including the absence of fever.*

† ARI is defined as an illness characterized by any two of the following: fever, cough, rhinorrhea (runny nose) or nasal congestion, sore throat, or muscle aches.

Investigator's name			Title		
Email address		Phone		Date	