

Instructions for Completing *Listeria* Initiative Case Report Form

Please complete this questionnaire for all laboratory-confirmed invasive listeriosis cases, even if the patient or a surrogate is unreachable for interview.

Laboratory criteria for diagnosis is:

- Isolation of *Listeria monocytogenes* from a normally sterile site (e.g., blood or cerebral spinal fluid or, less commonly, joint, pleural, or pericardial fluid; please note focal, invasive *Listeria* infections can occur almost anywhere in the body); OR
- In pregnancy-associated cases, isolation of *Listeria monocytogenes* from a normally sterile site (e.g., blood or cerebral spinal fluid) or isolation of *L. monocytogenes* from placental or fetal tissue (including amniotic fluid and meconium)

For cases of listeriosis in pregnant women or infants ≤60 days of age, the MOTHER is the case-patient. For purposes of the *Listeria* Initiative, a mother and her infant (mother-infant pair) with listeriosis count as a **single** infection or case, regardless of if one or both are culture-positive, because presumably the infection resulted from something the mother consumed.

Please remove pages 1 and 2 before sending the completed form to CDC. These pages are for internal health department use only.

Instructions for completing boxes 1–5 (pages 3–5) on specimen and clinical information:

- Most, if not all, of the information for this section should be available separate from the patient interview.
- Please complete Box 1 for **all patients**.
- The question in Box 2 asks if the listeriosis was associated with pregnancy.
 - If the illness was **not** associated with pregnancy, please **complete** Box 3 and **skip** Box 4.
 - If the listeriosis was associated with pregnancy, please **skip** Box 3 and **complete** Box 4.
- The question in Box 5 is about the patient's **underlying conditions and treatments**. This question is **optional**; however, the answers to these questions will provide important information about who is most affected by listeriosis and how to target prevention efforts.
- If a patient or surrogate is unreachable for interview, please send only pages 3–5 of this form to CDC. If you are able to obtain information about the patient's symptoms (page 6, question 8), please also send page 6.

General instructions for patient interview and food history:

- You will be asking about foods the patient ate in the 4 weeks before their illness onset.
- For pregnancy-associated cases (including newborn infection or fetal death) and newborns and infants up to 60 days old, the **mother is the case-patient**. She should be asked about her food history during the 4 weeks before **delivery** (please use the delivery date recorded in Box 4 for questions in this section).
- In the question stems and interviewee instructions, the text "**<case>**" is used in place of "you/he/she," and "**<case's>**" is used in place of "your/his/her." For example, "Did <case> eat foods from..." should be read as:
 - "Did **you** eat foods from..." for an interview with the case-patient.
 - "Did **she** eat foods from..." for an interview with a surrogate about a female case-patient.

- Please have a calendar available.
- Please attach additional pages if necessary.

Instructions for Food Purchase History (pages 6–7):

- Please read each type of store, point of purchase, or food outlet in the top section and ask respondent to list names for each category. The lists of store/restaurant types are meant to prompt the respondent.
- Please list the names of all points of purchase/restaurants mentioned, regardless of category, in the space provided. **You do not need to record a “yes” or “no” response for each category, only record the specific names and approximate locations reported in the space provided.**

Instructions for the Food Consumption History (pages 8-16):

- For each food item, please record whether the patient ate, likely ate, likely did NOT eat, or did NOT eat the food by circling or selecting the number corresponding to each response option.
 - If the patient has no idea whether or not they ate the food, circle or select 99 for “don’t know.”
 - The purpose of the “likely ate” and “likely did NOT eat” options is to capture additional information when the patient is not sure if they ate the food. Because we are asking about foods during a long exposure window (4 weeks), patients may be less sure about whether they ate a food during that time. Having an idea of whether it is likely or not that the patient ate certain foods, rather than “maybe ate,” can be helpful in developing hypotheses about the source of an outbreak.
- If a patient ate or likely ate a food item, please ask the respondent to describe the type or brand of the food.
 - For example, if they reported eating gouda cheese, please ask them the brand. If they do not know the brand, please ask them to describe the packaging.
 - Most patients will not know a brand for most produce items, but please ask them to describe the variety or packaging if possible. For example, if they report eating grapes, they might be able to tell you if they were red or green grapes and whether they were sold in a bag or clamshell.
- If a patient ate or likely ate a food item, please ask the respondent where the food was purchased (e.g., what store) or, if eaten away from the home, where it was eaten.
- Having additional information on the brand, type, and place of purchase for each food can speed outbreak investigations and minimize the need to re-contact patients.