

Guidelines for Determination of a Foodborne Disease Outbreak Joint Investigation

The following guidelines are to be used to assist in determining whether to perform a joint investigation with the Department of Business and Professional Regulation (DBPR) or Florida Department of Agriculture and Consumer Services (FDACS) for complaints in which a small number of persons are ill. Each complaint should be considered on a **case by case basis** using good epidemiological judgment. An outbreak is an incident in which two or more persons have the same disease, have similar symptoms, or excrete the same pathogens; and there is a time, place, and/or person association between these persons. A foodborne disease outbreak is one in which a common food has been ingested by such persons. Nevertheless, a single case of suspected botulism, mushroom poisoning, ciguatera or paralytic shellfish poisoning, other rare disease, or a case of a disease that can be definitely related to ingestion of a food, can be considered as an incident of foodborne illness and warrants further investigation. The following should be carefully reviewed when making a determination to perform a joint investigation:

- 72 hour food history - collected for each person (those ill and their well companions).
- Food item(s) consumed by ill persons compared to non-ill persons.
- Symptoms, incubation period, and duration of illness consistent with a foodborne pathogen associated with the suspect meal.
- Non-food exposure(s) in history e.g. family member ill, travel, water, animal, daycare, senior living facility, etc.
- Complaint log to determine if there have been other similar complaints from the same establishment reported during the same time period.
- Doctor's diagnosis or laboratory confirmation.

Schedule a joint investigation with agency of jurisdiction when any of these situations are met:

- Many individual people, or two or more independent groups, who report an illness with symptoms and incubation period consistent with a foodborne illness related to consumption of the same or closely related food items at the same establishment.
- One or more cases of laboratory-confirmed botulism (not due to a wound infection), or *Vibrio spp.* infection (not due to a wound infection, in a person who ate raw or undercooked shellfish within seven days before onset), or ciguatera poisoning, or paralytic shellfish poisoning.
- One or more cases of metal or other chemical intoxication occurring within less than an hour after ingestion.

When there is a single complaint with 2 or more ill, a joint investigation is warranted when all of the following criteria are met:

- 72 hour food history collected. No other common food exposures reported in 72 hour food history. This is the only meal the affected people have shared recently.
- Symptoms, incubation period, duration, are similar to each other and consistent with a specific foodborne pathogen(s) and implicated food(s).
- Persons living in the same household have no other likely non-food exposures (e.g. family member ill, travel, water, animal, daycare, senior living facility, etc.).

If conditions above are not met, then the ability to determine whether the meal reported is a possible source of a foodborne illness is very low. Look for other common establishments within the 72 hr food history. If none exist then log for surveillance and send to agency with jurisdiction.

****For assistance call your Regional Environmental Epidemiologist. ****