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. **