



STATE OF MICHIGAN
DEPARTMENT OF AGRICULTURE
LANSING

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DATE: February 3, 2006

TO: All Local Health Departments
Attn: Director of Environmental Health/Chief Sanitarian/Medical Director

FROM: Kevin Besey
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SUBJECT: Foodborne Illness Reporting and Documentation for Minimum Program Requirement (MPR) Compliance

This memo has been coordinated with Michigan Department of Community Health (MDCH) officials and replaces the June 24, 2003 memorandum entitled "Foodborne Illness Reporting and Documentation". Investigations conducted in accordance with this guidance will generally be considered to have met the intent of current Minimum Program Requirements.

The following areas are addressed:

1. Initial documentation and reporting by local health departments (LHD),
2. Notification of State agencies by LHD,
3. Documentation of investigation findings, and
4. Foodborne illness log recordkeeping and review requirements.

1. Initial documentation and reporting by local health departments (LHD)

A. Record initial illness complaint on either:

- (1) The updated Form A dated December 12, 2005 (attached), or its equivalent, or
- (2) ReportFoodPoisoning.com (RFP) report. See ReportFoodPoisoning.com website memo dated September 15, 2005 and the RFP toolkit available at <https://rusick2.msu.edu/toolkit.asp>

B. Document the dates and times that initial reports of alleged foodborne illness are received and the investigation initiated.

C. Local health departments (LHD) are responsible for investigating incidents of human illness & gathering information from each person interviewed in accordance with the Michigan Communicable Disease Rules R325.174. The following are recommended procedures:

- (1) For complaints of illness, use ANY OF THE FOLLOWING to conduct interviews of both ill people and those who were also identified in the complaint who may not have been ill:
 - i. the new Michigan Gastrointestinal Illness Complaint Interview Form (recommended option – see MDA/MDCH memo dated December 15, 2005;
 - ii. IAFP form C1/C2 or its equivalent, or;
 - iii. an outbreak-specific questionnaire (if one is used).

NOTE: Persons with laboratory confirmed illnesses must be entered into the Michigan Disease Surveillance System (MDSS)

2. Notification of State agencies by LHD

- A. Immediately notify MDA of potential foodborne outbreaks by *faxing* an illness complaint information form to MDA's Food Safety Planning and Response Unit at 517-373-3333, even if telephone contact with MDA has already taken place. MDA will then share the information with MDCH staff. In addition, telephone contact with Lisa Hainstock at (517) 241-0930 may also be made for consultation purposes.
- B. Please do not send alerts for isolated incidents involving one person or persons living in the same household, *unless*:
 - (1) The alleged illness(es) was/were caused by food obtained from an MDA- or Federally-regulated facility – report these incidents directly to the MDA Regional Supervisor in whose geographic territory the facility is located (map of MDA region attached);
 - (2) It appears that the report involves a single family that is potentially part of a larger outbreak; or
 - (3) It concerns a case of botulism, paralytic shellfish poisoning, histamine poisoning or other significant illness.

3. Documentation of investigation findings

- A. The Michigan Department of Community Health has requested that the CDC 52.13 foodborne outbreak report form be sent to MDA within 60 days of the date the first case became ill. The Centers for Disease Control and Prevention requires the Michigan Department of Community Health to enter the requested information into the national foodborne outbreak reporting system by the time limit set above. A preliminary 52.13 report (which includes data such as county of outbreak, onset date, exposure date, number of cases, and laboratory results) will be accepted if the outbreak is still on going.
- B. A final written report must be sent to MDA within 90 days of completing the investigation. Please do not send copies of completed interview forms with the final summary. Required outbreak documentation depends on the size of the outbreak as follows:
 - (1) For small outbreaks (typically ≤ 5 persons)
 - i. *Foodborne transmission may or may not have occurred* – submit a modified termination report (copy attached)
 - ii. *Definitely foodborne* – submit a CDC form 52.13 only

(2) For larger outbreaks

i. No or uncertain potential for foodborne transmission - modified termination report only)

ii. Definitely foodborne – CDC form 52.13 AND a written narrative containing the following sections:

1. Introduction
2. Epidemiology (Methods & Results)
3. Laboratory (Methods & Results)
4. Environmental (Methods & Results)
5. Discussion
6. Recommendations

- C. A termination report is not needed along with a written narrative when reporting a larger outbreak.
- D. Use of the attached “Food Preparation Review Worksheet” (attached) is strongly encouraged when LHD or MDA evaluate food facilities linked to foodborne illness outbreaks.
- E. Attachment 4 is an algorithm illustrating the recommended process.

4. Foodborne illness log record keeping and review requirements

- A. The foodborne illness complaint log may take the form of:
- (1) a paper log;
 - (2) electronic database; or
 - (3) Report Food Poisoning.com line listing – should the LHD decide to have all their foodborne illness complaints entered into this system either by consumers or LHD staff.
- B. A complete log of complaints recorded in RFP can be generated as an Excel spreadsheet periodically, and may be exported to an external database or printed as a hard copy for review.
- C. The IAFP “*Procedures to Investigate Foodborne Illness, 5th ed*” page 9, specifies the log to be reviewed each time an entry is made and/or each week to discover clusters of cases and/or involvement of a common food or place of eating that might otherwise go undetected. When an agency has multiple geographically separated offices, periodically send copies of logs to a central coordinating office for review.

Please feel free to contact either one of us if you have any questions.

Attachments

1. Revised Form A – dated December 12, 2005
2. MDA Modified Termination Report
3. Food Preparation Review Worksheet
4. Reporting and Documentation Process Algorithm dated December 12, 2005
5. MDA Food and Dairy Division Regions Map

cc: MDA Regional Supervisors
Dr. John Tilden
Dr. Mary Grace Stobierski