

**CDC's Emerging Infections Program  
CDC/USDA/FDA Foodborne Diseases Active Surveillance Network  
Steering Committee Conference Call**

Date: Thursday, September 9, 2004  
Time: 2:00-3:00 EDT  
Number: 877-601-3547 PassCode: 14349

A. Administrative

1. Personnel
  - a. Welcome Julie Choudhuri (CDC)
2. Status of manuscripts
  - a. Active/Published
3. Vision Meeting 2005
  - a. Nashville, Tennessee?
  - b. Dates: March 10-11, 2004

B. Surveillance

1. Travel and Outbreak Performance Standards
2. Status of 2003 Annual Report
3. *Listeria* analysis

C. Update on 2004 priorities

1. Validation of Multipliers (Elaine Scallan)
2. *Salmonella* Javiana (Jennifer Gillespie)
3. *Campylobacter*—Regional Differences
  - a. Laboratory survey (Drew Voetsch)
  - b. Grocery store survey (Jennifer Nelson)
4. *Campylobacter*—GBS (Fred Angulo)
5. Infant Illness (Drew Voetsch)
6. Antibiotic Resistance (Fred Angulo)
7. *Shigella* Case Report Form (Drew Voetsch)

D. Proposals

1. Antibiotic resistance patterns of *Salmonella* outbreaks (Outbreak Working Group)

E. Upcoming FoodNet conference calls, meetings, and deadlines

- |               |                        |                    |  |
|---------------|------------------------|--------------------|--|
| 1. Wednesday  | Sept. 8 <sup>th</sup>  | 1:00-2:00 pm EDT   | <i>Campylobacter</i> —Lab Survey Subcommittee    |
| 2. Thursday   | Sept. 9 <sup>th</sup>  | 12:00-1:00 pm EDT  | HUS/STEC Working Group call                      |
| 3. Thursday   | Sept. 9 <sup>th</sup>  | 1:00-2:00 pm EDT   | <i>Campylobacter</i> —Regional Differences       |
| 4. Wednesday  | Sep . 15 <sup>th</sup> | 1:00-2:00 pm EDT   | <i>Shigella</i> Working Group call               |
| 5. Thursday   | Sept. 16 <sup>th</sup> | 3:00-4:00 pm EDT   | Outbreak Working Group call                      |
| 6. Tuesday    | Sept. 28 <sup>th</sup> | 2:00-3:00 pm EDT   | Interventions Working Group call                 |
| 7. Wednesday  | Sept. 29 <sup>th</sup> | 1:00-2:00 pm EDT   | <i>Campylobacter</i> —Grocery Store Subcommittee |
| 8. Thursday   | Sept. 30 <sup>th</sup> | 1:00-2:00 pm EDT   | Antimicrobial Resistant Working Group call       |
| 9. Thursday   | Sept. 30 <sup>th</sup> | 2:00-3:00 pm EDT   | FoodNet Coordinators call                        |
| 10. Thursday  | Sept. 30 <sup>th</sup> | 3:00-4:00 pm EDT   | Infant Illness Working Group call                |
| 11. Wednesday | Oct. 6 <sup>th</sup>   | 3:30-4:30 pm EDT   | Validation of Multipliers Working Group call     |
| 12. Thursday  | Oct. 7 <sup>th</sup>   | 11:00-12:00 pm EDT | Attribution Working Group call                   |
| 13. Tuesday   | Oct. 12 <sup>th</sup>  | 2:00-4:00 pm EDT   | October Update meeting                           |
| 14. Wednesday | Oct. 13 <sup>th</sup>  | 4:00-5:00 pm EDT   | Burden Working Group call                        |
| 15. Thursday  | Oct. 14 <sup>th</sup>  | 2:00-3:00 pm EDT   | October Steering Committee call                  |

F. Data Submission Deadlines

1. Surveillance data transmission Friday, September 24<sup>th</sup>
2. HUS data transmission Wednesday, October 6<sup>th</sup>

## Active FoodNet Manuscripts

Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
<b>7</b>						
	92	Nelson, Jennifer (CDC)	KE Smith, DJ Vugia, T Rabatsky-Her, S Segler, H Kassenborg, S Zansky, K Joyce, N Marano, M Hoekstra, FJ Angulo	Prolonged duration of diarrhea associated with fluoroquinolone-resistant <i>Campylobacter</i> infections	9/3/2004	Published in Journal of Infectious Diseases (September 2004); Need to add to website
	96	Lee, Robin (CDC)	ME Beatty, AK Bogard, M Esko, FJ Angulo, C Selman, and EHS-Net Working Group	Prevalence of High-Risk Egg-Preparation Practices in Restaurants That Prepare Breakfast Egg Entrees: An EHS-Net Study		Published in Journal of Food Protection (July 2004); Need to add to website
	97	Roy, Sharon (CDC)	SM DeLong, SA Stenzel, B Shiferaw, JM Roberts, A Khalakdina, R Marcus, SD Segler, DD Shah, S Thomas, DJ Vugia, SM Zansky, V Dietz, MJ Beach, and the Emerging Infections (EIP) FoodNet Working Group	Risk Factors for Sporadic Cryptosporidiosis among Immunocompetent Persons in the United States from 1999 to 2001		Published in Journal of Clinical Microbiology (July 2004); Need to add to website
	98	Vanden Eng, Jodi (CDC)	R Marcus, JL Hadler, B Imhoff, DJ Vugia, P Cieslak, E Zell, V Deneen, K Gibbs McCombs, SM Zansky, MA Hawkins, RE Besser	Consumer Attitudes and Use of Antibiotics		Published in EID (September 2003); Need to add to website
<b>6</b>						
	89	Dunne, Eileen (CDC)	JC Lay, B Shiferaw, JB Bender, ZF Dembek, Davis, LG Wesolowski, S Zansky, M Carter, EJ Boothe, S Burnite, F Hardnett, J Wells, B Bibb, PM Griffin, P Mead	Results of active surveillance for pediatric Hemolytic Uremic Syndrome (HUS) in the United States, 1997-1999	9/3/2004	Submitted to JAMA
	91	Schroder, Carl (USDA)	AL Naugle, WD Schlosser, AT Hogue, FJ Angulo, E Ebel, JS Rose, WT Disney, K Holt, DP Goldman.	Estimated illnesses from Salmonella Enteritidis in shell eggs, United States, 2000	6/8/2004	Submitted to EID on April 26, 2004. Under editorial review.
	93	Scallan, Elaine (CDC)	SE Majowicz, G Hall, A Banerjee, CL Bowman, L Daly, T Jones, MD Kirk, M Fitzgerald, FJ Angulo	Prevalence of diarrhea in the community in Australia, Canada, Ireland and the United States	8/4/2004	Accepted at International Journal of Epidemiology
	94	Jones, Tim F (TN)	SN Bulens, S Gettner, RL Garman, DJ Vugia, D Blythe, MA Hawkins, SS Monroe, FJ Angulo, UD Parashar	Use of Stool Collection Kits Delivered to Patients Can Improve Confirmation of Etiology in Foodborne Disease Outbreaks	7/8/2004	In press with CID
	95	Green, Laura (CDC)	C Selman, FJ Angulo, V Radke, S Buchanan and the EHS-Net Working Group	Food service workers' self-reported food preparation practices: an EHS-Net study	6/8/2004	Has been requested for special issue; publication date unknown.

\*Status: 0=Proposal, 1=Analysis, 2=Writing, 3=Draft being reviewed by co-authors, 4=Incorporating comments, 5=NCID/CDC clearance, 6=At journal/In press, 7=Published

## Active FoodNet Manuscripts

Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
	149	Varma, Jay (CDC)	K Molbak, S Rossiter, M Hawkins, T Jones, S Mauvais, T Rabatsky-Ehr, S Stenzel, D Vugia, M Park, K Joyce, K Stamey, H Chang, F Angulo, and the EIP FoodNet Working Group	Antimicrobial resistance in Salmonella is associated with increased hospitalization; NARMS 1996-2000	9/1/2004	Accepted at JID
<hr/>						
	<b>5</b>					
	87	Samuel, Michael (CA)	DJ Vugia, KM Koehler, R Marcus, AA McNees, V Deneen, B Damaske, B Shiferaw, J Hadler, FJ Angulo	Consumption of risky foods among adults at high risk for severe foodborne diseases: room for improved targeted prevention messages	9/1/2004	Returned from CDC clearance; author incorporating comments. Has been cleared by FDA.
	88	Koehler, Kathleen (FDA)	T Lasky, SB Fein, SM DeLong, MA Hawkins, T Rabatsky-Ehr, SM Ray, B Shiferaw, E Swanson, and DJ Vugia for the EIP FoodNet Working Group	Population-based incidence of infection with selected enteric bacterial pathogens for children < 5 years of age, FoodNet, 1996-1998	7/2/2004	Revised version is in CDC clearance.
	150	Green, Laura (CDC)	C Selman, T Jones, E Scallan, R Marcus, and the EHS-Net Population Survey Working Group	Beliefs about sources of gastrointestinal illness	8/4/2004	
<hr/>						
	<b>4</b>					
	85	Kennedy, Malinda (CDC)	T Rabatsky-Her, S Lance-Parker, S Thomas, K Smith, J Mohle-Boetani, B Keene, P Mead.	Changes in bovine risk factors for E. coli O157: a case-control study in FoodNet sites: 1999-2000	9/3/2004	Revising based on Paul's comments.
	90	Watt, JP (CDC)	M Bales, AL Dannenberg, B Imhoff, SR Mullins, SF Dowell	Impact of a health-related internet hoax on a public health agency and the public: implications for health communication	2/27/2004	
	157	Devasia, Rose (TN)	JK Varma, JM Whichard, S Gettner, AB Cronquist, S Hurd, SD Segler, KE Smith, D Hoefler, B Shiferaw, FJ Angulo, TF Jones, and the EIP FoodNet Working Group	Health consequences of infection with multidrug resistant and pan-susceptible Salmonella Newport reported to FoodNet--United States, 2002-2003	9/3/2004	Need to revise numbers; submit to co-authors
<hr/>						
	<b>3</b>					
	86	Patrick (Evans), M (DeKalb Co. Health Dept)	PM Griffin, PS Mead	The effectiveness of recall notification: community response to a nationwide recall of hot dogs and deli meats	6/8/2004	Waiting on comments from Paul; should be submitted to clearance within the month of June
<hr/>						
	<b>2</b>					
	3	Varma, Jay (CDC)	R Marcus, SA Stenzel, SA Hanna, S Gettner, BJ Anderson, T Hayes, B Shiferaw, TL Crume, K Joyce, FJ Angulo for the EIP FoodNet Working Group	Risk factors for infection with multi-drug resistant Salmonella serotype Newport – United States, 2002-2003	6/8/2004	Analysis proceeding

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Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
	80	Varma, Jay (CDC)	MC Samuel, R Marcus, M Hoekstra, C Medus, S Segler, BJ Anderson, TF Jones, B Shiferaw, N Haubert, M Megginson, PV McCarthy, W De Witt, T Van Gilder, and the EIP FoodNet Working Group	Listeria monocytogenes infection from food in the regulatory era: a case-control study of risk factors for sporadic illness in the United States	9/3/2004	Draft to Fred for review
	82	Malone, Shauna (CT)	R Marcus, J Hadler, S Zansky, D Hoefler,	Knowledge, attitude, and practice of the use of irradiation among respondents to the FoodNet Population Survey in Connecticut and New York		
	84	Vugia, Duc (CA)	FoodNet Education Working Group	Foodborne diseases in the United States: lessons learned from FoodNet, 1996-2002	6/8/2004	
	158	Cheung, Michele (CA)	S Ray, B Shiferaw, N Vik, T Rabatsky-Ehr, E Boothe, M Kennedy, T Lasky, D Vugia	Foodborne pathogens causing illness in the first 7 days of life: FoodNet, 1996-2001	8/4/2004	Data is being reviewed again and a manuscript is being drafted
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<b>1</b>						
	1	Marcus, Ruthanne (CT)	MR Moore, JK Varma, C Medus, T Crume, R Marcus, SM Zansky, E Boothe, D Boxrud, RV Tauxe, and the EIP FoodNet Working Group	Risk factors for sporadic infection caused by Salmonella Enteritidis in the United States, 2002-2003	7/2/2004	
	81	Voetsch, Drew (CDC)	TBD	Analysis of trends in listeriosis in the FoodNet sites, 1996-2003	7/14/2004	Proposal was originally submitted/approved by Matt Moore; this is a resubmission.
	152	Frenzen, Paul (USDA-ERS)	A Drake, others TBD	The economic cost of E. coli O157:H7 infections	7/14/2004	Proposed submission to J. Food Protection
	153	Drake, Alison (CDC)	TBD	E. coli O157 and HUS infections, 1997-2002	9/3/2004	
	160	Frenzen, Paul (USDA-ERS)	TBD	Consumer interest in irradiated foods	8/9/2004	
	161	Bowen, Anna (CDC)	C Braden, C McDonald	Invasive E. sakazakii infections among infants	8/9/2004	

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Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
0						
	2	Kretsinger, Katrina (CDC)	J Crump, K Joyce, D Vugia, M Megginson, S Segler, S Hurd, J Luedeman, B Shiferaw, S Hanna, J Stevenson, F Angulo	Clinical consequences of typhoid fever due to Salmonella Typhi with decreased susceptibility to ciprofloxacin		
	4	Beach, Michael (CDC)	TBD	H20 manuscript		
	5	Jones, Tim F (TN)	TBD	Infant Salmonella case-control study		
	6	Snider, Cindi (CDC)	TBD	Descriptive characterization of adult HUS in FoodNet sites, 1997-2002	2/9/2004	
	7	Majowicz, Shannon (Health Canada)	E Scallan, G Hall, A Banerjee, MD Kirk, F Angulo	Respiratory symptoms among persons with gastrointestinal illness		
	8	Jones, Tim F (TN)	E Scallan, M McMillian, P Frenzen, N Ishill, A Cronquist, S Thomas, F Angulo	Darrhoeal illness in FoodNet: cycles 1-4 of the population survey		
	9	Scallan, Elaine (CDC)	T Jones, M McMillian, P Frenzen, N Ishill, A Cronquist, S Thomas, F Angulo	Respiratory symptoms among persons with diarrhea in FoodNet sites		
	162	Scallan, Elaine (CDC)	P Frenzen, others TBD	The economic cost of diarrheal illness in the United States		
	163	Scallan, Elaine (CDC)	The FoodNet Burden Working Group	Bacterial foodborne illness in the United States		
	165	Dunn, John R (CDC)	TBD	Substantial decline in the incidence of Escherichia coli O157:H7 infections in FoodNet, 2003		

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## Active FoodNet Manuscripts

Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
	166	Ailes, Elizabeth (CDC)	J Nelson, other TBD	Foodborne Diseases Active Surveillance Network Surveillance Summary, 1996-2003		
	167	Cronquist, Alicia (CO)	E Scallan, others TBD	Health care utilization among persons who have recently experienced gastrointestinal illness		
	168	Fullerton, Katie (CDC)	TBD	Infant Campylobacter case-control study		

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**Foodborne Diseases Active Surveillance Network (FoodNet)  
Draft Performance Standards for International Travel and Outbreak Variables**

**Travel Information**

**Target:** Interview  $\geq 85\%$  of all\* *Salmonella* cases ascertained in surveillance.

**Target:** Interview  $\geq 85\%$  of all *E. coli* O157 cases ascertained in surveillance.

\*Excluding GA which should interview  $\geq 25\%$  of all *Salmonella* ascertained in surveillance.

**Outbreak Information**

**Target:** Report 100% of CDC EFORS numbers if case is associated with a foodborne disease outbreak.

DRAFT

Hello everyone,  
 I'm writing to you because you were listed as a co-author on Alison Drake's IDSA abstract "Ethnic Disparities in Listeriosis incidence, FoodNet 1996-2003". If you, or someone in your site, are interested in joining this working group please let me know.

The purpose of this working group is to summarize the Listeria data in FoodNet since 1996. This would follow from the previous summary by the ABC's group (Tappero et al. Reduction in the incidence of human listeriosis in the United States. Effectiveness of prevention efforts? The Listeriosis Study Group. *JAMA* 1995;273(14):1188-22).

To update you on the progress:

1. We have steering committee approval to write this manuscript in July.
2. Alison has been working closely with Lewis Graves in the CDC Listeria laboratory to verify serotype and PFGE patterns for the listeria data, focusing on the case-control study isolates.
3. Unfortunately for all of us, Alison is leaving at the end of August. Fortunately, Elaine Scallan, as the senior author of the abstract, has volunteered to put together and present the IDSA poster in Boston.
4. For both the poster and manuscript, we are summarizing the data by ethnicity. Table 1 below is a recreation of Tappero's figure 3. Table 2 is the incidence by ethnicity. One of the key issues is missing data. We used the ABCs approach in a recent manuscript (*JAMA*. 2004;291:2197-2203.) "Case-patients for whom ethnicity was not reported were assumed to be non-Hispanic". Table 3 shows the ethnic disparity among perinatal cases (either mother or child).

Table 1. Incidence (cases/1 million population) of laboratory-confirmed listeriosis in the FoodNet sites, 1996-2003

Year	Perinatal Incidence <sup>1</sup>	Incidence in ≥50 year- olds	Total Incidence
1996	41.2	10.9	4.2
1997	22.6	11.4	4.3
1998	32.1	13.0	5.1
1999	39.4	9.3	4.0
2000	39.2	7.9	3.3
2001	18.1	6.7	2.6
2002	15.2	6.5	2.5
2003	7.6	7.1	2.4

<sup>1</sup>Including either infant cases or maternal cases (only counted once by Tappero et al). The denominator is children < 1 yr.

Table 2. Incidence (cases/1 million population) of laboratory-confirmed listeriosis by ethnicity in the FoodNet sites, 1996-2003

Year	Hispanic Incidence	Non-Hispanic Incidence	Percent of cases with missing ethnicity
1996	3.6	4.2	48
1997	3.0	4.4	58
1998	7.8	5.0	44
1999	6.8	3.8	44
2000	4.2	3.2	29
2001	3.8	2.5	21
2002	1.4	2.6	24
2003	1.8	2.4	22

Table 3. Incidence (cases/1 million population) of laboratory-confirmed perinatal listeriosis by ethnicity in the FoodNet sites, 1996-2003

Year	Hispanic Incidence	Non-Hispanic Incidence
1996	104.0	34.3
1997	0.0	25.3
1998	114.1	23.6
1999	159.6	27.8
2000	107.0	30.4
2001	46.0	13.9
2002	15.2	15.2
2003	15.2	6.5

# SALMONELLA JAVIANA

## CASE QUESTIONNAIRE

### SECTION 1: CASE IDENTIFIERS

SENDSS ID Number _____	Salmonella ID Number _____
State Lab ID Number _____	Specimen Collection Date _____
County _____	State _____

**Case Date of Birth**    \_\_\_ / \_\_\_ / \_\_\_  
    mm/dd / yyyy

Gender of case

Male.....	1
Female.....	2

(IF DON'T KNOW/NOT SURE, ASK DURING INTERVIEW)

**BEFORE YOU CONTACT CASE, HAVE "ADMINISTRATIVE PACKET: CASES" AND A CALENDAR IN FRONT OF YOU**

1. What is your occupation? \_\_\_\_\_
  
2. Do you work with children, the elderly or ill persons (i.e. health care worker)?
 

Yes .....	1
No .....	2
Don't Know/ Not Sure.....	7
Refused .....	9
  
3. Are you a food handler?
 

Yes .....	1
No .....	2
Don't Know/ Not Sure.....	7
Refused .....	9
  
4. If the case is a child, does your child attend daycare or school?
 

Yes , DAYCARE.....	1
Yes, SCHOOL.....	3
No .....	2
Don't Know/ Not Sure.....	7
Refused	9





8. Which condition? **Specify:** \_\_\_\_\_

## **SECTION 3: EXPOSURES**

### **PART 1. ILL CONTACTS**

**In the next section you will ask about the time period before their illness. Count the time period back from onset date.**

*For the next few questions, I would like to ask you about events which may have happened before your/your child's illness began.*

9. In the 7 days before your/your child's illness began, did you have close contact with anyone who had diarrhea (including household contacts)?

Yes .....	1
No .....	2
Don't Know/ Not Sure .....	7
Refused .....	9

### **PART 2A. FOOD EXPOSURES- GENERAL**

10. In the 7 days before becoming ill, where did you normally purchase your groceries?

Grocery Store or Deli.....	1
Farmer's Market/ Produce Stand .....	3
Co-Ops/ Warehouses (i.e. Sam's, Costcos) .....	4
Other <b>Specify:</b> _____.....	5
Don't Know/ Not Sure.....	7
Refused.....	9

11. Did you/ your child eat outside the home in the 7 days before becoming ill? *(Circle all that apply)*

Yes, FAST FOOD RESTAURANT/ TAKE-OUT.....	1
Yes, SIT-DOWN RESTAURANT.....	3
Yes, CAFETERIA/ BUFFET STYLE RESTAURANT .....	4
Yes, CHURCH SUPPER/ POTLUCK/ PICNIC.....	5
Yes, FRIEND OR RELATIVE'S HOME .....	6
No .....	2
Don't Know/ Not Sure.....	7
Refused.....	9

## FOOD EXPOSURES—FOOD HISTORY

Please try to remember what you/your child ate the day before becoming ill:

Breakfast:

Lunch:

Dinner:

Snack:

Please try to remember what you/your child ate 2 days prior to illness:

Breakfast:

Lunch:

Dinner:

Snack:

Please try to remember what you/your child ate 3 days prior to illness:

Breakfast:

Lunch:

Dinner:

Snack:

### 12. PART 2A. FOOD EXPOSURES- MEAT

12. In the 7 days before your/your child's illness began, did you/your child eat any of the following types of food? READ ALL OPTIONS.

		Ate	Most likely ate	Most likely did not eat	Did not eat	Specify kind of meat (ie steak)	Specify how prepared (ie grilled)	Refused
<b>A</b>	Ground Beef							
<b>B</b>	Other Beef							
<b>B</b>	Chicken, turkey, or other poultry							
<b>C</b>	Pork, including ham and bacon							
<b>D</b>	Other meat							
<b>D</b>	Seafood							
<b>E</b>								

13. In the 7 days before your/your child's illness began, was there any uncooked chicken in your/your child's home?

- Yes ..... 1
- No ..... 2
- Don't Know/ Not Sure..... 7
- Refused ..... 9

**PART 2B. FOOD EXPOSURES—DAIRY & EGGS**

14. In the 7 days before your/ your child's illness began, did you/your child eat any dairy products?

- Yes ..... 1
- No .....GO TO QUESTION 16 ..... 2
- .....
- Don't Know/ Not Sure..... 7
- Refused ..... 9

15. In the 7 days before your/your child's illness began, did you/your child eat or drink any of the following dairy products? **READ ALL OPTIONS.**

		In the 7 days before illness began? 1=yes 2=no 7=DK 9=Ref			
<b>A</b>	Pasteurized milk? All milk sold in stores is pasteurized.	1	2	7	9
<b>B</b>	Unpasteurized milk? This is usually milk purchased on a dairy farm, but not in a store.	1	2	7	9
<b>C</b>	Yogurt? Not frozen yogurt.	1	2	7	9
<b>D</b>	Buttermilk?	1	2	7	9
<b>E</b>	Sour Cream?	1	2	7	9
<b>F</b>	Butter? Not margarine.	1	2	7	9

16. In the 7 days before your illness began, did you/ your child eat any cheese?

- Yes ..... 1
- No ..... **GO TO QUESTION 18** ..... 2
- Don't Know/ Not Sure..... **GO TO QUESTION 18**..... 7
- Refused ..... **GO TO QUESTION 18** ..... 9

17. If YES to CHEESE, in the 7 days before your/your child's illness began, did you/your child eat any of the following types of cheese? **Please only include cheese that was never cooked, melted, or heated.**

**READ ALL OPTIONS.**

		In the 7 days before illness began? 1=yes 2=no 7=DK 9=Ref			
<b>A</b>	American cheese (processed)?	1	2	7	9
<b>B</b>	Cheddar?	1	2	7	9
<b>C</b>	Swiss?	1	2	7	9
<b>D</b>	Mozzarella or string?	1	2	7	9
<b>F</b>	Parmesan/Romano?	1	2	7	9
<b>K</b>	Mexican-style (queso fresco)?	1	2	7	9
<b>L</b>	Cream cheese?	1	2	7	9
<b>M</b>	Cottage cheese?	1	2	7	9
<b>O</b>	Cheese made from raw, unpasteurized milk? This is usually cheese from a dairy farm, but not a store.	1	2	7	9
	Other	1	2	7	9

18. In the 7 days before your illness began, did you/ your child eat any eggs?

Yes .....	1
No .....	2
Don't Know/ Not Sure.....	7
Refused .....	9

## **PART 2C. FOOD EXPOURES—FRUITS/VEGETABLES**

19. In the 7 days before your illness began, did you eat any uncooked tomatoes (such as in a salad or on a sandwich)?

Yes .....	1
No..... GO TO Question 22.....	2
Don't Know/ Not Sure..... GO TO Question 22.....	7
Refused .....	9

20. What kind of tomatoes were they?

Roma tomatoes.....	11
Cherry tomatoes.....	22
Home-Grown tomatoes .....	33
Store bought tomatoes.....	44
Other tomatoes .....	55
Don't Know/ Not Sure.....	7
Refused .....	9

21. Where were the tomatoes purchased?

Grocery Store or Deli.....	1
Farmer's Market/ Produce Stand .....	3
CO-Ops/ Warehouses (ie Sams, Costcos) .....	4
Other, <b>Specify:</b> _____.....	5
Don't Know/ Not Sure.....	7
Refused.....	9

22. In the 7 days before your/your child's illness began, did you/your child eat anything that contained the following fruits or vegetables? **READ ALL OPTIONS.**

		1=Ate	4=Most likely	5=Not likely	2=Did Not Eat	9=Refused
<b>A</b>	Alfalfa sprouts?					
<b>B</b>	Other sprouts?					
<b>C</b>	Lettuce?					
<b>E</b>	Unpeeled cucumbers?					
<b>F</b>	Uncooked carrots?					
<b>G</b>	Uncooked celery?					
<b>H</b>	Uncooked green onions / scallions?					
<b>I</b>	Other Uncooked onions?					
<b>J</b>	Uncooked green/bell peppers?					
<b>K</b>	Uncooked spinach?					
<b>L</b>	Uncooked cabbage? (Ex. Red)					
<b>M</b>	Uncooked broccoli?					
<b>N</b>	Uncooked cauliflower?					
<b>O</b>	Radishes?					
<b>P</b>	Cantaloupe?					
<b>Q</b>	Honeydew?					
<b>R</b>	Watermelon?					
<b>S</b>	Other melon?					
<b>T</b>	Strawberries?					
<b>U</b>	Blueberries?					
<b>V</b>	Other berries? Such as blackberries, raspberries, etc.					
<b>W</b>	Grapes?					
<b>X</b>	Pineapple?					
<b>Y</b>	Apples?					
<b>Z</b>	Peaches?					
<b>AA</b>	Mangoes?					
<b>BB</b>	Raw almonds					
<b>CC</b>	Raw pecans					
<b>DD</b>	Parsley?					
<b>EE</b>	Cilantro?					
<b>FF</b>	Other spices? <b>Specify</b> _____					

### PART 3. ANIMAL EXPOSURES

23. I'd like to ask you about some animals you/your child may have come into contact with in the 7 days before your/your child's illness began. When I ask about these animals, they may be animals you own, animals your neighbors own, or animals that wander onto your property.

	Did _____ (insert animal) live in your / your child's home? 1=yes 2=no 7=DK 9=Ref	Did anyone in the household <u>touch</u> this animal on your / your child's property? 1=yes 2=no 7=DK 9=Ref	Did anyone in the household <u>see</u> this animal on your / your child's property? 1=yes 2=no 7=DK 9=Ref	Did anyone in the household <u>touch</u> <u>this animal outside</u> your / your child's property? 1=yes 2=no 7=DK 9=Ref
<b>A</b>	Dogs	1 2 7 9	1 2 7 9	1 2 7 9
→→ <b>IF YES, A)</b> Did any of the dogs living in the home have diarrhea? 1 2 7 9 <b>B)</b> Where do the dogs urinate or defecate? Specify: _____				
<b>B</b>	Cats	1 2 7 9	1 2 7 9	1 2 7 9
→→ <b>IF YES</b> , did any of the cats living in the home have diarrhea? 1 2 7 9 →→ <b>IF THE CAT LIVES INSIDE THE HOME</b> , did the cat ever go outside? 1 2 7 9				
<b>C</b>	Hamsters, gerbils, guinea pigs, rats	1 2 7 9	1 2 7 9	1 2 7 9
<b>D</b>	Ferrets	1 2 7 9	1 2 7 9	1 2 7 9
<b>E</b>	Snakes	1 2 7 9	1 2 7 9	1 2 7 9
<b>F</b>	Iguanas	1 2 7 9	1 2 7 9	1 2 7 9
<b>G</b>	Other lizards / gecko	1 2 7 9	1 2 7 9	1 2 7 9
<b>H</b>	Frogs/toads	1 2 7 9	1 2 7 9	1 2 7 9
<b>I</b>	Salamanders/ Newts	1 2 7 9	1 2 7 9	1 2 7 9
<b>J</b>	Turtles	1 2 7 9	1 2 7 9	1 2 7 9
<b>K</b>	Large cockroaches/ Palmetto bugs?	<b>See in house?</b> 1 2 7 9	<b>DO NOT ASK</b>	1 2 7 9
<b>L</b>	Wild Mice/Rats?	<b>See in house?</b> 1 2 7 9	<b>DO NOT ASK</b>	1 2 7 9
<b>M</b>	Other Pets: Specify _____			

**PART 4. WATER EXPOSURES**

24. In the 7 days prior to illness, did you/your child drink from the following sources of water:

	Y=1 N=2 DK=7 Refused=9	If yes, primary source of drinking water?	Was the water filtered?	Was the water boiled?
a. Municipal or city water	1 2 7 9	1 2 7 9	1 2 7 9	1 2 7 9
b. Private well water	1 2 7 9	1 2 7 9	1 2 7 9	1 2 7 9
c. Bottled Water	1 2 7 9	1 2 7 9	Brand?	

**IF YES TO WELL WATER, GO TO QUESTION 25.**

**IF NO/DON'T KNOW/NOT SURE/REFUSED TO WELL WATER GO TO NEXT SECTION (QUESTION 28).**

25. **If YES to well water**, is the well on your property?

- Yes ..... 1
- No ..... **GO TO QUESTION 28**..... 2
- Don't Know/ Not Sure..... **GO TO QUESTION 28**..... 7
- Refused ..... **GO TO QUESTION 28**..... 9

26. Do you chlorinate your well?

- Yes ..... 1
- No ..... 2
- Don't Know/ Not Sure..... 7
- Refused ..... 9

27. Do you use the well water for:

	Yes	No	DK/ NS	Refused
a. Drinking	1	2	7	9
b. Cooking	1	2	7	9
c. Bathing	1	2	7	9

**PART 5. ENVIRONMENTAL EXPOSURES**

28. In the 7 days before your/your child’s illness began, did you/your child visit a lake, pond, creek, spring, or river?

- Yes ..... 1
- No ..... **GO TO QUESTION 30** ..... 2
- Don’t Know/ Not Sure..... **GO TO QUESTION 30** ..... 7
- Refused ..... **GO TO QUESTION 30** ..... 9

29. Did you/your child do any of the following activities? **READ ALL OPTIONS.**

		Yes	No	DK	Refuse
<b>A</b>	Swim in the water	1	2	7	9
<b>B</b>	Wade in the water	1	2	7	9
<b>C</b>	Touch the water	1	2	7	9
<b>D</b>	Drink/ Swallow the water	1	2	7	9

30. Do/Did you/your child live in or visit a home or area that borders a marsh, swamp, wetland, river, lake, pond, creek, or spring

- Yes ..... 1
- No ..... 2
- Don’t Know/ Not Sure..... 7
- Refused ..... 9

31. What is the approximate age of your/your child’s house?

- \_\_\_\_\_ **YEARS** ..... 1
- Don’t Know/ Not Sure..... 7
- Refused ..... 9

32. Is there carpet in the main living areas of the home?

- Yes ..... 1
- No ..... 2
- Don’t Know/ Not Sure..... 7
- Refused ..... 9

33. Are shoes worn inside the home?
- |                                |   |
|--------------------------------|---|
| Always/ Most of the time ..... | 1 |
| Sometimes.....                 | 2 |
| Not usually/ Never.....        | 3 |
| Don't know/ Not sure.....      | 7 |
| Refused .....                  | 9 |
34. Has there been any construction/ remodeling at your/your child's house in the past year?
- |                           |   |
|---------------------------|---|
| Yes .....                 | 1 |
| No .....                  | 2 |
| Don't Know/ Not Sure..... | 7 |
| Refused .....             | 9 |
35. In the 7 days prior to illness, did you/your child visit or work in a construction area?
- |                           |   |
|---------------------------|---|
| Yes .....                 | 1 |
| No .....                  | 2 |
| Don't Know/ Not Sure..... | 7 |
| Refused .....             | 9 |
36. Please describe what activities you do on a typical weekday \_\_\_\_\_
37. Please describe what activities you do on a typical weekend \_\_\_\_\_
38. In the seven days before you/ your child became ill, approximately how many hours a day did you/he/she spend outside (This includes playing outdoor sports, hobbies, gardening, etc)?
- |                           |   |
|---------------------------|---|
| 0-<1 hours                | 1 |
| 1-<4 hours.....           | 3 |
| 4-<8 hours .....          | 4 |
| More than 8 hours         | 5 |
| Don't Know/ Not Sure..... | 7 |
| Refused .....             | 9 |
39. In the 7 days before your/your child's illness began, did you/your child handle any soil, compost, or animal manure, while playing, gardening, or performing yard work?
- |                           |   |
|---------------------------|---|
| Yes .....                 | 1 |
| No .....                  | 2 |
| Don't Know/ Not Sure..... | 7 |
| Refused .....             | 9 |
40. In the 7 days before your/your child's illness began, did anyone in your/your child's household live on or work on a farm?
- |                           |   |
|---------------------------|---|
| Yes .....                 | 1 |
| No .....                  | 2 |
| Don't Know/ Not Sure..... | 7 |
| Refused .....             | 9 |

**PART 6. TRAVEL EXPOSURE**

41. In the 7 days before you/your child’s illness began, did you/your child travel within the U.S. outside of your/your child’s home state?
- Yes ..... 1
  - No .....**GO TO QUESTION 41**..... 2
  - Don’t Know/ Not Sure.....**GO TO QUESTION 41**..... 7
  - Refused .....**GO TO QUESTION 41**..... 9

42. What states? \_\_\_\_\_

43. In the 7 days before you/your child’s illness began, did you/your child travel within Georgia?
- Yes ..... 1
  - No .....**GO TO QUESTION 43**..... 2
  - Don’t Know/ Not Sure.....**GO TO QUESTION 43**..... 7
  - Refused .....**GO TO QUESTION 43**..... 9

44. What cities within Georgia?

Cities:	Counties (May determine later)

**SECTION 5: DEMOGRAPHICS**

*Now I would like to ask you a few questions about your/your child’s community and family. Some of these questions may be personal but they help us figure out how to prevent these infections. You may refuse to answer any of these questions.*

45. What is your/your child’s race? [Read only if necessary, respondent may choose more than one race].
- Caucasian..... 1
  - Black or African American..... 2
  - American Indian or Alaskan Native..... 3
  - Asian ..... 4
  - Pacific Islander ..... 5
  - Multiracial/ Bi-racial ..... 6
  - Other Race ..... 8
  - Don’t Know/ Not Sure.. (Do Not Read) ..... 7
  - Refused ..... (Do Not Read) ..... 9

46. Are you/Is your child of Hispanic or Latino origin?
- Yes ..... 1
  - No ..... 2
  - Don't Know/ Not Sure..... 7
  - Refused ..... 9
47. **(If case ≥ 18)** What is the highest grade of school you completed?  
**(If case < 18)** What is the highest grade or year of school completed for the oldest parent or guardian?
- Never attended school or kindergarten only ..... 1
  - Grades 1 through 8 (Elementary)..... 2
  - Grades 9 through 11 (Some high school) ..... 3
  - Grade 12 or GED (High School Graduate) ..... 4
  - College 1 year to 3 years (Some college or technical school) ..... 5
  - College 4 years or more (College graduate) ..... 6
  - Postgraduate education or equivalent ..... 8
  - Don't Know/ Not Sure.. (Do Not Read) ..... 7
  - Refused ..... (Do Not Read) ..... 9

48. Which of the following places best describes where you/your child live?
- City or urban area ..... 1
  - Suburban area ..... 2
  - Town or village ..... 3
  - Rural area, but not on a farm ..... 4
  - On a farm in a rural area ..... 5
  - Don't Know/ Not Sure.. (Do Not Read) ..... 7
  - Refused ..... (Do Not Read) ..... 9

49. How would you describe your/your child's current home?

[Read]		Yes	No	DK	Refuse
A	Apartment building / Flat	1	2	7	9
B	Condominium / Townhome / Duplex/ Mobile Home	1	2	7	9
C	Free-standing home	1	2	7	9
D	<b>Other?</b> <b>→→IF OTHER, SPECIFY</b> _____	1	2	7	9

50. What is your/your child's zip code? \_\_\_\_ \_
- Don't Know/ Not Sure..... 7
  - Refused ..... 9

51. At the time that you became ill, did you/your child have any form of medical insurance?

- Yes ..... 1
- No .....PROCEED TO END..... 2
- Don't Know/ Not Sure....PROCEED TO END ..... 7
- Refused .....PROCEED TO END ..... 9

50. Please describe your/your child's health insurance. You may choose more than one.

[Read]		Yes	No	DK	Refuse
<b>A</b>	Health Maintenance Organization or Preferred Provider Organization	1	2	7	9
<b>B</b>	Fee-for-Service Insurance	1	2	7	9
<b>C</b>	Medicaid	1	2	7	9
<b>D</b>	Medicare	1	2	7	9
<b>E</b>	Private Insurance	1	2	7	9
<b>F</b>	Other?	1	2	7	9
→→IF YES, SPECIFY					

*If the case is less than 1 year old, proceed to the infant section.*

*Thank you so much for your participation. Your responses will help tremendously. Have a great day.*

**Infant Section. Additional Questionnaire to be completed if case is < 1 year of age.**

1. Since birth, has (infant's name) ever been breastfed?

- Yes ..... 1
- No ..... **GO TO QUESTION 4** ..... 2
- Don't Know/ Not Sure.....**GO TO QUESTION 4** ..... 7
- Refused .....**GO TO QUESTION 4** ..... 9

2. During the past 7 days, was your child breastfed?

- Yes ..... 1
- No ..... 2
- Don't Know/ Not Sure..... 7
- Refused ..... 9

3. At what age did your infant stop breastfeeding? \_\_\_ months OR \_\_\_ weeks

- Still breastfeeding..... 1
- Don't Know/ Not Sure..... 7
- Refused ..... 9

4. In the past 7 days, did he/she receive breast milk from a bottle or a cup?

- Yes ..... 1
- No ..... 2
- Don't Know/ Not Sure..... 7
- Refused ..... 9

5. In the past 7 days, did he/she receive formula from a bottle or a cup?

- Yes ..... 1
- No .....GO TO QUESTION 8..... 2
- Don't Know/ Not Sure..... GO TO QUESTION 8..... 7
- Refused ..... GO TO QUESTION 8..... 9

6. What type or types of infant formula did your baby drink in the past 7 days? (Circle all that apply)?

- Mixed from Powder ..... 1
- Mixed from concentrated liquid ..... 2
- Ready to Drink ..... 3
- Don't know/ Not sure ..... 7
- Refused ..... 9

7. Was the formula milk or soy-based? (Circle all that apply)

- Milk..... 1
- Soy..... 2
- Don't know/ Not sure..... 7
- Refused..... 9

8. In the past 7 days, did he/she drink any water (including water used in the preparation of formula or other beverages) from the following sources? **[READ]**

	Y=1 N=2 DK=7 Refused=9	If yes, primary source of drinking water?	Was the water filtered?	Was the water boiled?
a. Municipal or city water	1 2 7 9	1 2 7 9	1 2 7 9	1 2 7 9
b. Private well water	1 2 7 9	1 2 7 9	1 2 7 9	1 2 7 9
c. Bottled Water	1 2 7 9	1 2 7 9		

9. In the past 7 days, did (infant's name) eat any solid foods, including cereal in the bottle?

Yes ..... 1  
 No ..... 2  
 Don't Know/ Not Sure..... 7  
 Refused ..... 9

10. In the past 7 days, was your child in the kitchen while food was being prepared?

Yes ..... 1  
 No ..... 2  
 Don't Know/ Not Sure..... 7  
 Refused ..... 9

11. In the past 7 days, did (infant's name):

	Yes	No	DK	Refused
Crawl or Scoot	1	2	7	9
Walk independently (feet only)	1	2	7	9

12. In the past 7 days, did he/she play on or have direct contact with:

	Y=1	N=2	DK=7	Refused=9
The kitchen floor	1	2	7	9
The kitchen counter	1	2	7	9
The kitchen sink (including bathing)	1	2	7	9
The interior of the refrigerator	1	2	7	9
Carpeted or uncarpeted bathroom floor	1	2	7	9
Carpeted floors in your home	1	2	7	9
The ground outdoors? (directly on the ground or on a blanket on the ground)	1	2	7	9

13. In the past 7 days, did he/she use a pacifier or teething ring?

Yes ..... 1  
 No ..... 2  
 Don't Know/ Not Sure..... 7  
 Refused ..... 9

14. In the past 7 days, did he/she suck his or her thumb or fingers?

Yes ..... 1  
 No ..... 2  
 Don't Know/ Not Sure..... 7  
 Refused ..... 9

15. Did your child place other not edible foods in his/her mouth in the past 7 days?

Yes .....	1
No .....	2
Don't Know/ Not Sure.....	7
Refused .....	9

16. Does your child use a "security" blanket?

Yes .....	1
No .....	2
Don't Know/ Not Sure.....	7
Refused .....	9

*Thank you so much for your participation. Your responses will help tremendously.  
Have a great day.*

**Steering Committee Proposal**  
**Centers for Disease Control and Prevention**  
**Emerging Infections Program**  
**Foodborne Diseases Active Surveillance Network (FoodNet)**

Phone: (404)-371-5465

Fax: (404)-371-5444

**Title:** Antibiotic Resistance Patterns of *Salmonella* Outbreaks  
 (Addition to current NARMS isolation guidelines in FoodNet sites)

**Submitted:** 8/31/04

**Background:** Interest was expressed during the 2004 NARMS External Review to examine the antibiotic resistance patterns of *Salmonella* outbreaks. Outbreaks serve as a good source of data for examining the relationship between multidrug resistance strains of *Salmonella* and food vehicles. This interest in *Salmonella* outbreaks was addressed in the FoodNet Outbreak Working Group August conference call where it was met with approval. Table 1 indicates the number of *Salmonella* outbreaks reported to EFORS annually from 1998-2003 in FoodNet sites.

**Proposal:** Beginning January 1<sup>st</sup>, 2004, for every *Salmonella* outbreak reported in EFORS with 3 or more laboratory confirmed cases, FoodNet sites will submit 3 isolates to the NARMS laboratory for resistance testing. Looking at Table 1, 20 -25 outbreaks of *Salmonella* with  $\geq 3$  laboratory confirmed cases were reported annually by FoodNet sites. The NARMS laboratory has agreed to receive these isolates. Isolate submission guidelines will be drafted and shared with the FoodNet Outbreak Working Group.

<b><i>Salmonella</i> Outbreaks Reported in EFORS by FoodNet Site and Year</b>							
State	year						Total
	1998	1999	2000	2001	2002	2003	
CA	1	3	0	1	1	1	7
CO	0	0	0	2	1	0	3
CT	2	5	2	6	1	1	17
GA	1	5	3	0	3	4	16
MD	2	4	3	10	8	6	33
MN	4	4	4	3	4	5	24
NY	1	0	1	1	4	1	8
OR	3	0	3	2	4	9	21
TN	0	0	1	0	2	2	5
Total	14	21	17	25	28	29	134
Total ( $\geq 3$ lab conf cases)	13	18	14	17	23	25	110