

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

Date: Thursday, February 10, 2005  
 Time: 2:00-3:00 PM EST  
 Numbers: Number: 888-458-9977 PassCode: 43877

A. Administrative

1. Status of manuscripts
  - a. Active manuscripts
2. 2005 Vision Meeting
  - a. Agenda
  - b. 2005 Proposed Priorities

B. Surveillance

1. Performance Standards
  - a. Outbreaks
2. Active data
  - a. Negative binomial model
    - A. Predictors
    - B. Upcoming Projects
3. HUS data

C. FoodNet Studies

1. *Salmonella* Javiana pilot
2. *Salmonella* Newport
3. *Salmonella* Enteritidis
4. *Listeria*
5. Infant *Salmonella*/*Campylobacter*
6. *E. coli* O157/HUS
7. Population Survey Cycle 5

D. Proposals

1. Formation of Population Survey Working Group (Olga Henao)

E. Miscellaneous

1. Conference call features

F. Upcoming FoodNet conference calls, meetings, and deadlines

1. Wednesday	Feb. 9 <sup>th</sup>	4:00-5:00 pm EST	Burden Working Group call
2. Thursday	Feb. 10 <sup>th</sup>	12:00-1:00 pm EST	HUS/STEC Working Group call
3. Monday	Feb. 14 <sup>th</sup>	2:00-3:00 pm EST	Infant Case-Control Study Working Group
4. Thursday	Feb 17 <sup>th</sup>	12:00-1:00 pm EST	Population Survey Working Group call
5. Thursday	Feb. 17 <sup>th</sup>	3:00-4:00 pm EST	Outbreak Working Group call
6. Tuesday	Feb. 22 <sup>nd</sup>	2:00-3:00 pm EST	Interventions Working Group call
7. Thursday	Feb. 24 <sup>th</sup>	1:00-2:00 pm EST	Antimicrobial Resistance Working Group call
8. Thursday	Feb. 24 <sup>th</sup>	2:00-3:00 pm EST	FoodNet Coordinators call
9. Wednesday	Mar. 2 <sup>nd</sup>	1:00-2:00 pm EST	<i>Campylobacter</i> —Grocery Store Subcommittee
10. Wednesday	Mar. 2 <sup>nd</sup>	CANCELLED	<i>Campylobacter</i> —Lab Survey Subcommittee
11. Thursday	Mar 3 <sup>rd</sup>	12:00-1:00 pm EST	Population Survey Working Group call
12. Wed-Fri.	Mar. 9-11 <sup>th</sup>		FoodNet Vision Meeting
13. Wednesday	Mar. 16 <sup>th</sup>	2:00-3:00 pm EST	Enterococci Resistance Study call
14. Thursday	Mar. 17 <sup>th</sup>	12:00-1:00 pm EST	Population Survey Working Group call
15. Thursday	Mar. 17 <sup>th</sup>	2:00-3:00 pm EST	NARMS Quarterly call
16. Thursday	Mar. 31 <sup>st</sup>	12:00-1:00 pm EST	Population Survey Working Group call
17. Thursday	Mar. 31 <sup>st</sup>	2:00-3:00 pm EST	FoodNet Coordinators call
18. Friday	Apr. 1 <sup>st</sup>	2:00-3:00 pm EST	Retail Food Study call
19. Tuesday	Apr. 12 <sup>th</sup>	2:00-4:00 pm EST	April Update Meeting
20. Thursday	Apr. 14 <sup>th</sup>	12:00-1:00 pm EST	Population Survey Working Group call
21. Thursday	Apr. 14 <sup>th</sup>	2:00-3:00 pm EST	April Steering Committee call

G. Data Submission Deadlines

1. Surveillance data transmission Friday, February 11th (Note: last transmission for preliminary 2003 data for the MMWR)
2. HUS data transmission Wednesday, March 2nd

## Active FoodNet Manuscripts

Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
<b>7</b>						
	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	2/3/2005	published in the International Journal of Epidemiology
	174	Kassenborg, Heidi (MN)	KE Smith, RM Hoekstra, MA Carter, RV Tauxe, FJ Angulo	Letter to the Editor: Domestically Acquired Fluoroquinolone-Resistant Campylobacter Infection	10/6/2004	
<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	12/1/932	Not accepted at Archives of Pediatrics & Adolescent Medicine
	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.
	173	Nelson, Jennifer (CDC)	RV Tauxe, FJ Angulo	Letter to Editor: Reply to Cox	11/19/2004	
	177	Shiferaw, Beletshachew	K Griffin, W Chapin, C Finnegan, PR Cieslak	Use of Hospital Discharge Data to Assess the incidence of Guillain-Barre Syndrome	1/26/2005	
<b>5</b>						
	87	Samuel, Michael (CA)	DJ Vugia, KM Koehler, R Marcus, AA McNeese, 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	1/6/2005	Waiting on analysis.
	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	1/6/2005	Manucript awaiting final managerial clearance from FDA. Intent is to submit manuscript to The Pediatric Infectious
	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	Kicked out of Clearance

\*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
	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	1/12/2005	Submitted to clearance.
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	<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	1/4/2005	Manuscript has been revised. Currently waiting on co-author to provide comments
	90	Watt, James P (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	
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	<b>3</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	1/12/2005	Manuscript has been circulated to the co-authors
	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	1/12/2005	Comments from co-authors by January 21.
	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	1/6/2005	Waiting to incorporate comments into manuscript
	175	DeBess, Emilio E. (OR)	E Pippert, M Brown, D Pacholl, F Angulo, PR Cieslak	Food Handler Survey: Knowledge and attitudes of foodborne illnesses in two Oregon counties		
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	<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	into clearance within next month
	8	Jones, Tim F (TN)	E Scallan, M McMillian, P Frenzen, N Ishill, A Cronquist, S Thomas, F Angulo	Diarrhoeal illness in FoodNet: cycles 1-4 of the population survey		

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Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
	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	Needs to be revised.
	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
	176	Shiferaw, Beletshachew		Comparison of Three Surveillance Systems for Hemolytic Uremic Syndrome in Oregon	1/26/2005	
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<b>1</b>	5	Jones, Tim F (TN)	TBD	Infant Salmonella case-control study		
	7	Majowicz, Shannon (Health Canada)	E Scallan, G Hall, A Banerjee, MD Kirk, F Angulo	Respiratory symptoms among persons with gastrointestinal illness		
	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	

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Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
	161	Bowen, Anna (CDC)	C Braden, C McDonald	Invasive E. sakazakii infections among infants	8/9/2004	
	163	Scallan, Elaine (CDC)	The FoodNet Burden Working Group	Bacterial foodborne illness in the United States		
	168	Fullerton, Katie (CDC)	TBD	Infant Campylobacter case-control study		
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<b>0</b>	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		
	6	Snider, Cindi (CDC)	TBD	Descriptive characterization of adult HUS in FoodNet sites, 1997-2002	2/9/2004	
	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		
	71	Nelson, Jennifer (CDC)	TBD	Multiple pathogens isolated over a short period, FoodNet 1996-2002		
	162	Scallan, Elaine (CDC)	P Frenzen, others TBD	The economic cost of diarrheal 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		
	166	Ailes, Elizabeth (CDC)	J Nelson, other TBD	Foodborne Diseases Active Surveillance Network Surveillance Summary, 1996-2003		

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Status	ID	Lead	Co-authors	Manuscript Title	Date Last Corr.	Comments
	167	Cronquist, Alicia (CO)	E Scallan, others TBD	Health care utilization among persons who have recently experienced gastrointestinal illness		
	171	Hedbergs, Craig (UMN)	TBD	Look at EFORS data from FoodNet sites to determine the value of the contributing factors		
	172	Hoekstra, Mike (CDC)	TBD	Protective exposures in matched case-control studies of foodborne illness		

# DRAFT

## FoodNet Vision Meeting Agenda Nashville, TN March 9<sup>th</sup>, 2005

Wednesday March 9<sup>th</sup>

Location: Holiday Inn Select\Vanderbilt in Nashville

### Morning Session: Coordinators Meeting

- 8:30-9:00 Coffee/tea
- 9:00-9:45 Review of FoodNet surveillance methods: *Jennifer Nelson, Elizabeth Ailes, Cindi Snider*
- 9:45-10:15 Performance Standards: *Jennifer Nelson, Julie Choudhuri*
- 10:15-10:30 BREAK
- 10:30-10:40 Results from the Coordinators' Survey
- 10:40-11:00 Clinical laboratory audits
- 11:00-11:20 NEDSS: *Jennifer Nelson, Elizabeth Ailes*
- 11:20-11:30 Conclusions

### Afternoon Session: Attributions Meeting

- 12:30-12:35 Welcome and introduction (5)
- 12:35-12:55 Overview of CDC activities: *Fred Angulo (20)*
- 12:55-1:15 FSIS and FDA attribution needs: *Rueben Varghese (20)*
- 1:15-1:45 "Point-of-processing" attribution project: *Carrie Rigdon (30)*
- 1:45-2:15 Outbreak "point-of-consumption" attribution project: *John Painter (30)*
- 2:15-2:45 Discussion (30)
- 2:45-3:00 BREAK
- 3:00-3:20 Protective effects in FoodNet case-control studies: *Mike Hoekstra (20)*
- 3:20-3:40 Blending project: *George Maldonado (20)*
- 3:40-4:00 Food Safety Research Consortium attribution activities: *Glenn Morris (20)*
- 4:00-5:00 Discussion - 2005 goals (60)
- 5:00-5:30 Concluding remarks (30)
- 6:30 Coordinators Dinner (open to all), Restaurant: TBD, Nashville, TN

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# DRAFT

## FoodNet Vision Meeting Agenda Nashville, TN March 10-11th, 2005

**Thursday March 10<sup>th</sup>**

**Location: Holiday Inn Select\Vanderbilt in Nashville**

### **Morning Session: Review**

8:00-8:30 Coffee/tea

8:30-8:40

Welcome and introductory comments

1. Tennessee Department of Health: *Tim Jones* (5)
2. Foodborne and Diarrheal Diseases Branch: *Robert Tauxe* (5)

8:40-9:25

EIP Budgets

9:25-9:30

Summary of Coordinators' meeting: *Jennifer Nelson* (5)

9:30-9:45

BREAK

9:45-11:00

Review and discussion of 2003 established priorities- What has FoodNet done to address them?

Moderator: *Fred Angulo*

1. Attribution: *Paul Cieslak* (35)
  - Overview of Attributions satellite meeting
  - Modeling subcommittee report
2. HUS/STEC Working Group: *Cindi Snider* (10)
  - Reviewed adult HUS surveillance methods
  - Drafted HUS cohort study protocol
3. Interventions Working Group: *Pat Ryan* (10)
  - Launched long-term care facility survey
4. Infant *Salmonella* and *Campylobacter* case-control study: *Katie Fullerton* (10)
  - Preliminary data analysis began
5. Outbreak/Norovirus Working Group: *Tim Jones* (10)
  - Collected 2000-2002 non-foodborne outbreak data
  - Compared 2000-2002 non-foodborne outbreak data to 2000-2002 foodborne outbreak data

11:00-11:30

Review and discussion of 2004 established priorities- What has FoodNet done to address them?

Moderator: *Fred Angulo*

1. *Campylobacter* – Guillain Barré Syndrome: *Fred Angulo* (5)
2. Infant Illness: *Drew Voetsch* (5)
3. *Shigella* Case Report Form: *Drew Voetsch* (10)
4. *Salmonella* Javiana: *Melissa Tobin-D'Angelo* (10)

11:30-12:30

Lunch (on your own)

### **Afternoon Session: Review**

**Location: Holiday Inn Select\Vanderbilt in Nashville**

12:30-12:45

3<sup>rd</sup> Annual FoodNet Star Award Ceremony: *Fred Angulo and Patricia Griffin* (15)

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## DRAFT

- 12:45-1:15 Review of 2004 established priorities (continued)- What has FoodNet done to address them?  
Moderator: *Fred Angulo*
5. *Campylobacter* – Regional Differences Working Group
    1. Laboratory Survey: *Drew Voetsch* (10)
    2. Grocery Store Survey: *Jennifer Nelson* (10)
  6. Antibiotic Resistance Working Group: *Tom Chiller* (10)
- 1:15-1:30 NARMS: *Tom Chiller, David White* (15)
  1. Paratyphoid surveillance
  2. *Campylobacter* sampling scheme
  3. Retail Food Study
- 1:30-1:45 Burden of Illness Projects: *Tim Jones, Elaine Scallan* (15)
  4. Burden of illness studies
  5. International Collaboration on Foodborne Diseases
- 1:45-2:00 Population Survey: *Elaine Scallan, Olga Henao* (15)
  1. Validation of multipliers
  2. Population Survey Cycle 5
- 2:00-2:10 Other FoodNet updates  
Moderator: *Fred Angulo*
  1. Reactive Arthritis Study (OR, MN): *Kirk Smith* (5)
  2. Giardia Study (CO, MN): *Alicia Cronquist* (5)
- 2:10-2:25 BREAK
- 2:25-2:30 Poetry reading: *Katie Fullerton* (5)
- 2:30-3:30 Comments from regulatory partners
  1. USDA: *Reuben Varghese* (30)
  2. FDA: *Jack Guzewich, Pat McCarthy* (30)
- 3:30-3:40 Comments from CDC partners
  1. EHS-Net: *Carol Selman* (10)
- 3:40-4:00 Negative binomial model development: *Mike Hoekstra, Olga Henao* (20)
- 4:00-4:30 MMWR: Orientation discussion  
Moderator: *Fred Angulo, John Dunn*
- 4:30-4:50 Introduction to 2005 proposed priorities
- 4:50-5:00 Closing remarks
- 6:30 pm FoodNet Dinner, Restaurant: TBD

### Friday March 11<sup>th</sup>: Set Priorities

Location: Holiday Inn Select/Vanderbilt in Nashville

- 8:00-8:30 Coffee/tea
- 8:30-9:40 MMWR: *Fred Angulo, John Dunn*
- 9:40-9:50 EIP coordination

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## DRAFT

9:50-10:00      BREAK

10:00-10:30     Discussion of possible Year 2005 enhancements: *Fred Angulo, Drew Voetsch* (30)

10:30-10:45     Priority setting for FoodNet Year 2005 enhancements: *Fred Angulo, Drew Voetsch* (15)

10:45-11:00     Vote on possible FoodNet Year 2005 priorities/studies: *Fred Angulo, Drew Voetsch* (15)

11:00-11:05     Where are we going? The new FoodNet Year 2005 priorities: *Patricia Griffin* (5)

11:05-12:00     Preliminary action plan and working groups for Year 2005 priorities

12:00-12:30     Final comments and meeting adjourned

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**Foodborne Diseases Active Surveillance Network (FoodNet)  
2005 Vision Meeting**

**Candidate Priorities**

**ANTIMICROBIAL RESISTANCE**

- Antibiotic resistance study on *S. Typhimurium* DT104 (OR)
- Antibiotic resistance study on *Vibrio* (OR)
- Complete Antimicrobial Working Group study development and launch study (CT, CO)
- Antibiotic resistance study for veterinary isolates – *Salmonella* (OR)
- Adverse health effects of antimicrobial resistance in *Salmonella* (MN)

**ATTRIBUTION**

- Continue attribution studies (GA, MN)
- Attribution of *Campylobacter* infection (OR)
- Continue to emphasize the need to collect travel and outbreak information (CO, NY)

**INTERVENTIONS/EDUCATION**

- Teach elementary school kids about food safety (OR)
- Complete Nursing Home Survey and Reptile Survey (CO, CT)
- STEC- education of health-care professionals. We feel MDs and other health care providers need to receive educational materials about STEC, specifically the differences between *Shigella* and Shiga toxin-related disease (CT)
- Grand summary of what we have learned in FoodNet thus far – to be published in an MMWR surveillance summary (MN)
- FoodNet Lessons Learned 1995-2004: this project should be finalized and distributed this year to public health partners and the public. Some funding may be needed to mass publish a presentable pamphlet (CA)
- Our relationships with local health departments, labs and ICPs and the need/desire to do a better job of giving information about FoodNet findings back to them. Propose working on the “Lessons Learned” document with the goal of distributing it to our many EIP programs (CO)
- Continue intervention studies (GA)

**LINKING**

- Integration of Human and Food Data - "Integration of molecular subtyping information for isolate of FoodNet pathogens from humans and food products. For instance, every time USDA isolates *E. coli* O157:H7 or *Listeria* from a processing plant sample or retail food products, or FDA isolates *Shigella* from an imported produce item, the PFGE pattern of that isolate should be sent to CDC and state public health departments (or at least make them easily accessible through some mechanism, eg, our lab could check the PulseNet database anytime they want for new food isolates). We would document a lot more outbreaks (mostly smaller ones) and attribute a lot more cases of illnesses to specific products/product types with this process. The same for *Salmonella*" (CT)
- Ensure linkages between all reporting systems (EFORS, PulseNet, NARMS, and the HIN) are maintained and complete. EIP staff will be active in assisting in the completion and timely submission of EFORS reports, including specimen collection. The EIP recently obtained access to the Viral Laboratory database and will routinely link viral testing results to foodborne outbreaks. EIP staff will continue to routinely link NARMS isolates and PulseNet results to confidential case reports and update records reflecting the additional information obtained through these systems (NY)

**Foodborne Diseases Active Surveillance Network (FoodNet)  
2005 Vision Meeting**

**Candidate Priorities**

**MANUSCRIPTS**

- Writing up results from completed studies (CT)
- Increase the level of participation and initiation by EIP staff in research and publications (NY)
- Trends in Risky Foods Consumption among Healthy Adults and Populations At-Risk for Severe Foodborne Diseases: this project was proposed and approved in 2004, and population surveys data have been gathered for analyses. The working group should finish the analyses and write up this year (CA)

**PATHOGENS AND SYNDROMES**

*E. coli*/HUS

- Complete study development and launch *E. coli*/HUS cohort study (CT, CO, MN)
- STEC – clarification of STEC surveillance data in FoodNet sites (Which sites are reporting what? How are sites completing the numerous variables in PHLIS or their surveillance database? What is CDC pulling out to report? What about NETSS reporting in the MMWR? Could any of these inconsistencies affect STEC incidence in surveillance?) (CT)

*Salmonella*

- *Salmonella* Javiana Study (GA)

*Shigella*

- Continue *Shigella* data collection and begin analyses late 2005 (CO)

*Campylobacter*

- Finish *Campylobacter* Laboratory Survey (CT)
- Finish *Campylobacter* Grocery Store Survey (CT)

Norovirus

- Norovirus sequencing for molecular epidemiology purposes (OR)
- Symptoms of norovirus illness based on viral subtypes (OR)
- Population-based surveillance of viral pathogens (e.g., Norovirus) associated with foodborne illness – we would propose this working group explore the feasibility of implementing such a surveillance system. Group activities might include a literature review, identification of the resources necessary to implement such a system, possible barriers (e.g., Norovirus is not a reportable disease in many states, etc.) (MD)

Multiple pathogen related

- Duration of illness, incubation period, and other markers of symptom severity based on age (CO, OR)
- Risk Factors for Foodborne Diseases Among Asian Children <5 years old: We propose a site-specific case-control study to identify risk factors for *Campylobacter*, *Salmonella*, and *Yersinia* infection among Asian children. Some supplemental funding may be needed for incentives in getting the participation of cases and controls (CA)

**STUDY DESIGN AND DATA ANALYSIS**

- Spatial analysis and Geographic Information Systems – we would propose using these statistical and graphic techniques to enhance the existing analyses of the FoodNet surveillance data (MD)
- Optimal utilization of PFGE data (GA)

**Foodborne Diseases Active Surveillance Network (FoodNet)  
2005 Vision Meeting**

**Candidate Priorities**

**MISCELLANEOUS**

- Need to establish a group at level of the EIP program that monitors use of laboratory surveys in all of the EIP programs (CO)
- Improving the communication, coordination, and reporting among the state laboratories, Bureau of Food Protection, Regional Epidemiology, and the EIP (NY)
- Improve the dissemination of information to our local partners (NY)

## Proposed Outbreak Performance Standard

### Outbreak Surveillance

1. Timeliness of outbreak reporting  
**Target:  $\geq 80\%$  of initial EFORS reports entered within 2 months of first onset**
  
2. Completeness of data
  - a. The number of laboratory-confirmed cases (variable 'labcases') should be completed for all outbreaks (Note: if there are no laboratory-confirmed cases, "0" should be entered in the field).  
**Target:  $\geq 95\%$  of EFORS reports should have completed information for number of laboratory-confirmed cases**
  
  - b. The total of the five age groups should equal  $\geq 95\%$   
**Target:  $\geq 85\%$  of EFORS reports should have age group information completed**
  
  - c. The total of the genders should equal 100%  
**Target:  $\geq 85\%$  of EFORS reports should have gender information completed**
  
  - d. The number of hospitalized cases (variable 'hospnum') should be completed for all outbreaks (Note: if there are no hospitalized cases, "0" should be entered in the field).  
**Target:  $\geq 85\%$  of EFORS reports should have completed information for number of hospitalized cases**
  
  - e. The number of deaths (variable 'deathnum') should be completed for all outbreaks (Note: if there are no deaths, "0" should be entered in the field).  
**Target:  $\geq 85\%$  of EFORS reports should have completed information for number of deaths**

Comparison of Prediction of Estimates for 2004 using partial data for 2004 and Results using Preliminary Data for 2004

Our intent was to predict percent changes and relative risks for the 2004 MMWR using year-to-date case counts (January-November) available as of December 2004. To do this, we reviewed methods to predict the case counts for 2004 and provided an estimate for 2004 based on one of the methods.

Here we present the predictions using the multiplier methods described at the Jan 2005 meeting and the results obtained when we used the counts available to us as of January 25, 2005. We would like to point out that we expect minor changes in the counts when we receive the transmission with the counts to be used in the MMWR (Feb transmission).

	Estimates using 1996-2002 complete, 2003 from Jan-Nov, and estimating Dec 2003 (2003 multiplier)	2004 estimates using Jan 25, 2005 data	Predictions for 2004 Jan-Dec case counts using 2003 multiplier	2004 estimates using Jan 25, 2005 data
	RR (95% CI)	RR (95% CI)	%change (95% CI)	%change (95% CI)
<i>Campylobacter</i>	0.70 (0.62, 0.79)	0.69 (0.61, 0.77)	-30 (-38, -21)	-31 (-38, -23)
<i>Cryptosporidium</i>	0.54 (0.40, 0.71)	0.52 (0.39, 0.70)	-46 (-60, -29)	-48 (-61, -30)
<i>E. coli O157</i>	0.54 (0.40, 0.73)	0.49 (0.36, 0.67)	-46 (-60, -27)	-51 (-64, -33)
<i>Listeria</i>	0.73 (0.55, 0.98)	0.64 (0.48, 0.86)	-27 (-45, -2)	-36 (-52, -14)
<i>Salmonella</i>	0.87 (0.77, 0.98)	0.85 (0.76, 0.96)	-13 (-23, -2)	-14 (-24, -4)
<i>Shigella</i>	0.63 (0.36, 1.13)	0.62 (0.35, 1.10)	-37 (-64, 13)	-38 (-65, 10)
<i>Vibrio</i>	2.11 (1.25, 3.57)	2.08 (1.23, 3.51)	111 (25, 257)	107 (23, 251)
<i>Yersinia</i>	0.57 (0.43, 0.75)	0.52 (0.40, 0.68)	-43 (-57, -25)	-48 (-60, -32)

*Salmonella* Javiana is an increasingly common serotype in the U.S., particularly in the southeastern states. *Salmonella* Javiana has caused foodborne outbreaks and has most recently been associated with consumption of Roma tomatoes from a large deli chain on the east coast. On the other hand, a 2001 study evaluating a dramatic increase in this serotype in Mississippi demonstrated a significant association between amphibian exposure and *Salmonella* Javiana infection. In 2003, Georgia had 262 cases of *Salmonella* Javiana, making it the third most common serotype (second most common if the Atlanta Metropolitan Statistical Area is excluded) in the state. In 2004, this trend continued. Since *Salmonella* Javiana continues to account for a large burden of disease and specific risk factors are still unclear, we conducted a hypothesis-generating questionnaire in Georgia, South Carolina, and Tennessee. North Carolina was involved in the planning process but did not pursue interviews. From August-October, we received reports of 101 cases of *Salmonella* Javiana in Georgia. In total, 83 cases were interviewed (58 GA, 14 TN, 11 SC). Overall, we did not find very high proportions of positive answers to potentially high-risk food items, including tomatoes. There were high frequencies of positive responses to questions about drinking water from streams lakes, rivers or ponds, and reptile and amphibian contact. Please see spreadsheet for details. For the GA data, we attempted to compare the answers to what might be expected using *Salmonella* Newport study control data and the most recent cycle of the Population Survey. Although exact question wording for a number of the variables varied between data sources, some comparisons were made. For two of the GA cases, attempts to isolate *Salmonella* Javiana from environmental samples including yard soil, water, and vacuum cleaner dust were unsuccessful. The information obtained from this questionnaire, as well as previous investigations, will be useful in designing a case control study to understand the risk factors for *Salmonella* Javiana.

<b>COMPARISON OF KEY VARIABLES ACROSS POPULATION AND SALMONELLA STUDIES</b>			
<b># and % of persons with the exposure (Javiana and population survey in 7 days prior to illness onset; Newport study is 5 days prior to illness onset)</b>			
<b>KEY †</b> - some data sources had specified certain data sources and thus may not be directly comparable			
<b>Variable</b>	<b>FoodNet Population Survey (interviewed = 920)</b>	<b>Newport Controls (N=130)</b>	<b>GA Javiana cases (N=58)</b>
<b>Food</b>			
Ate uncooked tomatoes	598 (64%)	72 (55.4%)	22 (37.9%)
Ate ground beef [newport data specifies ground beef in sauce, chilli, etc]	1282 (70.4%)	50 (38.8%) †	34 (58.6%)
Ate other beef [pop survey specifies 'excluding deli meats']	440 (47.8%) †	steak 35 (27%) †	14 (24.1%)
		nonhamburger beef other 9 (7%)	
Ate chicken <i>excluding</i> deli meats [Newport data specifies any chicken; Javiana data specifies any poultry]	812 (88.3%)	100 (77.5%) †	41 (70.7%) †
Ate pork <i>excluding</i> deli meats [Javiana data includes ham and bacon]	446 (48.5%)	N/A	28 (48.3%) †
<b>Environmental Exposures</b>			
Drank from private well	153 (17%) †	N/A	17 (29.3%) †
Well water primary source	N/A	N/A	10 (17.2%)
Drank bottled water	N/A	N/A	42 (72.4%)
Bottled water primary source	N/A	N/A	24 (41.4%)
Drank municipal water	N/A	N/A	43 (74.1%)
Municipal water primary source	N/A	N/A	21 (36.2%)
Drank from lake/pond/river/stream	3 (.3%)	2 (1.5%)	2 (3.5%)
<b>Animal Contact</b>			
Contact with reptiles and amphibians [pop survey has 1 item for "reptile/amphibians"]	58 (6.3%) †	<i>added together "touched on property" and "touched off property" so could be inflated</i>	<i>*Reporting 2 categories: definite contact only first, then below definite or possible contact.</i>
Contact with snakes*		4 (3%)	1 (1.7%)
			2 (3.4%)
Contact with iguanas*		0	0
			0
Contact with lizards/geckos*		1 (0.8%)	4 (6.9%)
			6 (10.4%)
Contact with frogs/toads*		3 (2.3%)	5 (8.6%)
			7 (12.1%)
Contact with salamanders/newts*		4 (3.1%)	2 (3.5%)

<b>COMPARISON OF KEY VARIABLES ACROSS POPULATION AND SALMONELLA STUDIES</b>			
<b># and % of persons with the exposure (Javiana and population survey in 7 days prior to illness onset; Newport study is 5 days prior to illness onset)</b>			
<b>KEY †</b> - some data sources had specified certain data sources and thus may not be directly comparable			
<b>Variable</b>	<b>FoodNet Population Survey (interviewed = 920)</b>	<b>Newport Controls (N=130)</b>	<b>GA Javiana cases (N=58)</b>
Contact with turtles*		4 (3%)	2 (3.5%)
			1 (1.7%)
Contact with dogs*	N/A	84 (64%)	18 (31%)
	N/A		23 (39.7%)
Contact with cats*	N/A	52(40%)	9 (15.5%)
	N/A		12 (20.7%)
<b>Travel</b>			
Travel outside usual circles	N/A	N/A	5 (8.6%)
Travel out of state	N/A	14 (10.8)	7 (12.1%)
Travel outside of US	18 (1%)	2 (1.54%)	0
<b>Demographics</b>			
Lives in city or urban area	N/A	37 (28%)	20 (34.5%)
Lives in suburban area	N/A	44 (33%)	14 (24%)
Lives in town	N/A	15 (12%)	5 (8.6%)
Lives in rural area not farm	N/A	24 (18%)	13 (22%)
Lives on farm	N/A	9 (7%)	1 (1.7%)

	Interviewed N=58	Not interviewed N=42
<b>Demographics</b>		
White race	39 (67.2%)	22 (53.1%)
Black race	16 (27.5%)	12 (28.6%)
Male gender	34 (58.6%)	26 (61.9%)
Hispanic ethnicity	0	3 (7.14%)
<b>Hospitalized Status</b>		
Hospitalized	24 (41.4%)	8 (19.05%)
Not-hospitalized	34 (58.6%)	29 (69.05%)
Unknown	0	5 (11.9%)
<b>Rural (using 35,000/county as cut-off)</b>	18 (31.0%)	11 (26.2%)

**Comparison of proposals for POPULATION SURVEY:**

<b>Category</b>	<b>MACRO</b>	<b>Clearwater</b>
<b>Cost</b>	15 minutes: \$664K 20 minutes: \$808K	15 minutes: \$599K 20 minutes: \$621K
<b>BRFSS experience</b>	Contractor for previous cycles of the pop survey. BRFSS experience: 14 sites as of 2002 (started in 1989).	11 sites. Started in WY in 1994 and under contract with PA until 2009. Favorable references from NY and VT
<b>Interview</b>		
Interviewer training	Interviewers with BRFSS and FoodNet population survey experience.	80 hrs of training required before administration of interview + on-going training. Interviewers with BRFSS experience.
Experience in interview of children or proxy parent interviews	Yes- interviewed children and adolescent for previous cycles of the population survey and other surveys	Yes – have conducted surveys with children and adolescents
Adjustment for differences in time zones when calling	Yes – times are adjusted to conform to time zone being called; Macro has call centers in different parts of the country.	Yes – times used by company are adjusted to conform to time zone being called.
<b>Languages</b>		
Experienced interviewers in Spanish and English	Yes – Interviewers in English and Spanish	Yes – Interviewers in English, Spanish and French
Participation letter in multiple languages	N/A	Yes- two sided letters to be mailed in English and Spanish
<b>Cognitive testing</b>	At least 24 adults will be recruited by telephone. Rural respondents will be interviewed in ORC Macro's Plattsburgh, New York office. Urban respondents will be interviewed in ORC Macro's New York City office.	Cognitive testing conducted using 20 adults at focus group facility in Boise, ID by a trained facilitator.
<b>Sample design</b>	Two-stage sample disproportionate stratified sample (DSS) random digit dialing (RDD) design.	Two-stage sample disproportionate stratified sample (DSS) random digit dialing (RDD) design.
<b>Sample frame</b>	FoodNet sites as requested	FoodNet sites as requested
<b>Questionnaire design</b>		
CATI system	Programming of survey CATI system and pretested by Macro and can be pretested by FoodNet also.	Programming of survey into Ci3 WinCATI is done by a BRFSS programmer and pretested by Clearwater and FoodNet (if requested).
Pilot testing	100 completed interviews for the pre-test.	10 completed interviews per site with experienced interviewers and monitored by data collection supervisors and members of BRFSS team at Clearwater.
<b>Technical report</b>	Methods report (electronic delivery only) provided in the month following the end of the interviewing period.	Electronic report. Provided within 30 days of the last interviewing period of the cycle. Includes methods summary, final disposition codes and response rates.

## **FoodNet Steering Committee Proposal**

**Subject:** Formation of Population Survey Working Group

**Proposed by:** Olga Henao/Elaine Scallan and the Population Survey working group members

**Date submitted:** Feb 10th, 2005

**Proposal:** We propose to form a Population Survey working group. This working group would be responsible for reviewing survey questions and overseeing the launch of cycle 5 of the Population Survey in January 2006.

**Plan of action:** The working group will: (1) meet at 2 week intervals between Feb 3, 2005 and May 26, 2005 to review the questions to be included in Cycle 5 of the Population Survey; (2) present a proposal, at the Vision Meeting, for approval to continue preparations for the launch (in January 2006) of Cycle 5 of the Population Survey; [*and subject to the proposal being approved*] (3) finalize the questionnaire for submission to the CDC Clearance/CDC IRB process by June 30<sup>th</sup>, 2005; (4) oversee the launch of the survey.

## Conference Call Features

All participants must use a touch-tone phone to participate in an Instant Meeting conference. The following features are available for you to use during an active conference:

- Press **\*1** for a private pre-recorded help menu. A recorded message will play listing the available touch- tone features.
- Press **\*2** for a roll call (conference). A playback of the participants' names who have joined the call will be played into the conference. This feature is only available when Name Record feature is set to "yes."
- Press **\*3** for a roll call (private). A playback of the participants' names who have joined the call will be announced to the initiator only. This feature is only available when Name Record feature is set to "yes."
- Press **\*4** to mute or unmute the entire conference (except for your line).
- Press **\*5** to enable Conference Continuation. This allows you to determine if the active conference can continue after you disconnect. In order to use this feature, Auto Continuation must be set to "yes."
- Press **\*6** to mute or unmute your line.
- Press **\*7** to lock or unlock the conference. If you lock the call, those attempting to join will hear a prompt indicating the conference has been "secured."
- Press **\*8** to dial out to additional participants within North America.
- Press **\*9** for Entry/Exit options. You can specify how the entry and exit of participants are announced for the active conference: by tone, by recorded name, or by silent entry.