

LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

NC REPORTABLE DISEASE/CONDITION	NC DISEASE CODE	INFECTIOUS AGENT (S (S))
CAMPYLOBACTER INFECTION	50	<i>Campylobacter species;</i> <i>C. jejuni & C. coli</i> (at least 20 possible biotypes and serotypes)
PREPARING FOR INVESTIGATION		
KNOW THE DISEASE/CONDITION	<ul style="list-style-type: none"> • Read about Campylobacter Infection in the CD Manual. • See the case definition for Campylobacter Infection in the CD Manual. • Study APHA <i>Control of Communicable Diseases Manual</i>, 19th ed., pp 94 - 98. • Print and review reporting forms: <i>Part 1: Confidential Disease Report (DHHS 2124)</i> <i>Part 2: Campylobacter Infection (DHHS/EPI #50)</i> 	
CONDUCTING INVESTIGATION		
COLLECT CLINICAL INFORMATION	<ul style="list-style-type: none"> • Obtain healthcare provider clinical notes from date(s) of service for this disease/condition. • If patient hospitalized for this disease, obtain medical record (admission note, progress note, lab report(s), and discharge summary). • Look for evidence in the medical record that supports clinical findings described in the case definition. • Campylobacter is usually a diarrheal illness, but may be asymptomatic. • Before contacting the patient, verify what information the healthcare provider has shared with the patient/family. 	
REVIEW LABORATORY INFORMATION	<ul style="list-style-type: none"> • Obtain laboratory reports specific to this disease. • Evaluate laboratory results to determine if requirements of the case definition are satisfied. 	
APPLY THE CASE DEFINITION	<ul style="list-style-type: none"> • Use the case definition to determine if the clinical and laboratory findings meet the case definition criteria. 	

IMPLEMENTING CONTROL MEASURES	
ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE	<ul style="list-style-type: none"> • Interview the patient (use the Part 2 Form).
IMPLEMENT CONTROL MEASURES TO PREVENT DISEASE AND ADDITIONAL EXPOSURES	<ul style="list-style-type: none"> • Use the CDC website www.cdc.gov to teach at risk people about the disease. • Work with local health director and North Carolina Department of Agriculture (NCDA) to stop distribution of any potentially contaminated products or foods. • Work with the environmental health specialist to acquire food or water samples for testing if needed and to evaluate sanitation and hand hygiene in sensitive occupations and settings. • Exclude children in child care and food service, healthcare, and child care workers until asymptomatic. • Stool positive patients who are no longer symptomatic, may return to food service, healthcare, and child care when public health has evaluated hand hygiene practices and documents them as appropriate. • Diapered children/adults with questionable handwashing habits should be separated from others until stool-negative. • If further testing of the patient is indicated as a control measure for stool positive patients involved in child care, food service or healthcare, offer testing through the SLPH. Patients may seek testing through their private healthcare provider. • Consider risk communication/education messages to public and health professionals.
REPORTING INVESTIGATION	
REPORT TO NC COMMUNICABLE DISEASE BRANCH (CD)	<ul style="list-style-type: none"> • Enter Part 1 and Part 2 Communicable Disease Reports into NC EDSS as a new event, or update the existing event if already entered. • Assign event to State Disease Registrar when case investigation complete. • Do an "Event_Print" in NC EDSS after assigning to the state. Keep for one year along with any additional notes. Maintain as a surveillance file, not a medical record.
CASE FINDING	<ul style="list-style-type: none"> • During the course of the investigation, look for symptoms of disease in other exposed individuals or household contacts. • Refer symptomatic individuals to healthcare provider for evaluation. • If two or more cases are found that are epidemiologically linked, report as an outbreak of Campylobacter Infection. • If indicated, submit Outbreak Summary Report within 30 days from close of outbreak.

SPECIAL CONSIDERATIONS	
RISK COMMUNICATION	<ul style="list-style-type: none"> • Consider using risk communication tools conservatively if this is a low profile case. • Outbreaks of even naturally-occurring cases may need NC HAN alerts, EPI-X reports, MD alerts, and probably a press release. • NC DHHS Public Information Office (919) 733-9190 is available to assist local health departments as needed.
STATE LABORATORY OF PUBLIC HEALTH (SLPH) TESTING	<ul style="list-style-type: none"> • In an outbreak investigation, ensure a positive clinical specimen from a reference lab is sent to the SLPH for biotyping and serotyping. Notify the SLPH of impending specimen. Use the following link for specimen submission information: http://slph.state.nc.us/microbiology/enteric-bacteriology/default.asp