

LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

NC REPORTABLE DISEASE/CONDITION	NC DISEASE CODE	INFECTIOUS AGENT (S)
FOODBORNE POISONING	131	<i>Mushroom toxins</i>
PREPARING FOR INVESTIGATION		
KNOW THE DISEASE/CONDITION	<ul style="list-style-type: none"> • Read about <i>Foodborne Poisoning</i> in the CD Manual. • See the case definition for Foodborne Poisoning: Mushroom in the CD Manual. • Refer to USFDA, Bad Bug Book: Mushroom Toxins at: http://www.cfsan.fda.gov/~mow/chap40.html • Print and review reporting forms: <p><i>Part 1: Confidential Disease Report (DHHS 2124)</i> <i>Part 2: Foodborne Poisoning: Mushroom (DHHS/EPI #131)</i></p>	
CONDUCTING INVESTIGATION		
COLLECT CLINICAL INFORMATION	<ul style="list-style-type: none"> • If patient hospitalized for this disease, obtain medical record (admission note, progress note, other lab report(s), and discharge summary). • Obtain healthcare provider clinical notes from date(s) of service for this disease/condition. • Look for evidence in the medical record that supports clinical findings described in the case definition. 	
REVIEW LABORATORY INFORMATION	<ul style="list-style-type: none"> • There are no specific laboratory tests to confirm these diseases in humans. • Evaluate the laboratory results from the hospital admission, if applicable, to determine if the requirements of the case definition are satisfied. • Contact the CD Branch if there are suspect mushrooms still available for toxin testing or identification. 	
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"> • Review clinical records and interview patient or contacts for potential source(s) of exposure. • Mushroom intoxications are typically associated with wild mushrooms collected by private individuals. If suspected mushrooms were purchased from a vendor of any kind, immediately dispatch environmental health specialist to investigate mushrooms and determine their point of origin. 	

IMPLEMENT CONTROL MEASURES TO PREVENT DISEASE AND ADDITIONAL EXPOSURES	<ul style="list-style-type: none"> • Embargo suspect mushrooms if applicable. • Consult with the CD Branch to arrange for mushroom toxin testing or species identification. NOTE: The CD Branch will have to contact university researchers or CDC for assistance; mushroom intoxications are rare events in North Carolina.
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, interview other exposed individuals for symptoms of illness. • Refer symptomatic individuals to healthcare provider for evaluation.
SPECIAL CONSIDERATIONS	
STATE LABORATORY OF PUBLIC HEALTH (SLPH) TESTING	<ul style="list-style-type: none"> • Not applicable.
PUBLIC HEALTH PREPAREDNESS AND RESPONSE (PHPR)	<ul style="list-style-type: none"> • Not applicable.
PERSONAL PROTECTIVE MEASURES	<ul style="list-style-type: none"> • Not applicable.
RISK COMMUNICATION	<ul style="list-style-type: none"> • Consider using risk communication tools conservatively if this is a low profile, naturally-occurring case. • NC DHHS Public Information Office (919) 733-9190 is available to assist local health departments as needed.