

# OUTBREAK REPORTING FORM

## A. Reporting Details

1. Agency submitting report: **Ministry of Health**
2. Country: **Montserrat**
3. County/district/parish/region: **Not Applicable**
4. Name of person submitting report: **Dorothea Hazel**
5. Contact telephone number: **664 491 2880**
6. Date this form was completed (dd/mm/yy): **27 / 03 / 12**
7. Is this  a first report or  an updated/amended report?

## B. Type of Outbreak

8.  Food-borne  Respiratory  
 Water-borne  Sexually transmitted infection  
 Vector-borne  Unknown at this stage  
 EPI disease  Other, please specify below  
     **Airborne**
9. Was a vehicle/source identified?  Yes  No
10. If yes, please specify: **Droplet, Direct contact, Aerosol associated with vomiting**

## C. Descriptive Epidemiology (person, place)

11. Number of cases:  Suspected or Probable  
 Confirmed  
 Total

12. List number of cases (suspect, probable and confirmed) by age group and gender:

Age Group	Cases			
	Male	Female	Unknown	Total
< 1 year	4	2		6
1 - 4 years	35	32		67
5 - 14 years	29	41		70
15 - 24 years	9	19		28
25 - 44 years	15	45		60
45 - 64 years	13	33		46
65+ years	12	13		25
Unknown	0	0		0
Total	117	185	0	302

13. Was the whole country affected?  Yes  No
14. If no, describe the areas affected: .....
15. Exposure setting (check all that apply):  
 General community  
 Health institution (e.g. hospital, nursing home)  
 Other institution (e.g. prison, boarding home)  
 Hotel or resort complex  
 Restaurant  
 School or child care facility  
 Other, please specify,  
 Don't know

## D. Clinical Details

16. Common Symptoms/Syndromes (check all that apply)  
 Nausea  Vomiting  
 Diarrhea  Abdominal cramps  
 Fever  Rash  
 Respiratory symptoms  Hemorrhagic symptoms  
 Genital ulcer  Genital discharge  
 Neurological symptoms  Headache  
 Other, specify: .....
17. Number of cases hospitalized:   
 (including cases that died)
18. Number of cases that died:   
 (including cases hospitalized)
19. Incubation period (circle appropriate units)  
 Average  days  
 Range:  days -  days
20. Duration of illness (circle appropriate units)  
 Average:  days  
 Range:  days -  days

## E. Case Summary (time)

21. Please record number of cases per unit time. Record time interval as:  
 - Month (i.e. Jan 04, Feb 04, Mar 04), or  
 - Epidemiological week (i.e. 23, 24, 25), or  
 - Day (record as exact date, i.e. 23/06/04)

Time Interval	Number Suspect/ Probable Cases	Number of Confirmed Cases
<b>(2011)</b>		
<b>Epi Week 49</b>	<b>25</b>	<b>1</b>
<b>Epi Week 50</b>	<b>115</b>	<b>0</b>
<b>Epi Week 51</b>	<b>48</b>	<b>0</b>
<b>Epi Week 52</b>	<b>37</b>	<b>0</b>
<b>(2012)</b>		
<b>Epi Week 1</b>	<b>24</b>	<b>0</b>
<b>Epi Week 2</b>	<b>23</b>	<b>0</b>
<b>Epi Week 3</b>	<b>12</b>	<b>0</b>
<b>Epi Week 4</b>	<b>11</b>	<b>0</b>
<b>Epi Week 5</b>	<b>6</b>	<b>0</b>

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### F. Etiology

22. Was a primary causative pathogen identified in the outbreak?  Yes  No

23. If yes, please specify the name and subtype (if known) of the pathogen Norovirus

### G. Clinical Specimens (\*e.g. stool, blood, urine, nasal aspirate, etc)

24. Type of Specimen	Number Tested	Number Positive	Etiologic Agent	Subtype 1	Subtype 2	Antimicrobial Resistance Profile
<b>Stool</b>	<b>1</b>	<b>1</b>	<b>Norovirus</b>			

### H. Food or Environmental Specimens (\*e.g. ground beef, raw chicken, water, surface swab, etc )

25. Type of Specimen	Number Tested	Number Positive	Etiologic Agent	Subtype 1	Subtype 2	Antimicrobial Resistance Profile
<b>None</b>						

### I. Results of an epidemiological study

26. What type of epidemiological study was conducted? **No**

Cohort study  Other, please specify .....

Case Control Study  No epidemiological study was conducted

27. If a cohort study was conducted, what was the overall attack rate? ..... %

(note, attack rate = [number ill/total persons at risk] x 100)

28. If a cohort or case control study was conducted, please complete the following table

Risk Factor	Odds Ratio or Relative Risk	95% Confidence Intervals	p-value

## J. Additional Outbreak Details

*Monday December 12, 2011*

- Increase in cases fitting definition of Syndromic GE noted for previous week (**Week 49**).
- Number of persons also presented with vomiting.
- Cases (both GE and vomiting) not confined to any particular age group or location.
- Condition seemed to be of brief duration, only 1 of the 26 persons presented with fever. – **provisional diagnosis – gastroenteritis due to Norovirus**. Clinicians urged to collect stool specimens and forward to the Laboratory
- Two children (6 & 15yrs) were hospitalized for dehydration – both recovered and were discharged within 36 hours.
- Environmental Health Officers advised to verify the quality of island's drinking water – reported that all indicator organisms were within acceptable ranges.
- Public education commenced regarding importance of hand washing and safe handling of food and beverages.
- Daily monitoring of 7 regular reporting sites commenced. Weekly monitoring of child care facilities, primary and secondary schools commenced.

*December 30, 2012*

- Amidst concerns that the recommencement of School on January 4, 2012 could result in an upsurge in incidence; a meeting was held with the Director of Education to encourage the following: (i) provision of adequate supplies of soap for hand washing; (ii) provision of bleach for cleaning, particularly in the event of symptomatic children; (iii) enforcement of the schools' policy of asking parents to keep sick children away from school.
- Community Nursing staff were asked to monitor child care and primary school facilities to enable early identification of problems.

### **NOTES:**

1. A total of 3 specimens were collected during the month of December. One (1) was sent to CAREC, the others were eventually discarded due to challenges with the Courier service. (Specimens would only be accepted by the Courier on certain days of the week and the 'courier days' did not always coincide with the days on which staff were able to collect specimens)
2. Norovirus was isolated from the lone specimen sent to CAREC.
3. On December 30, a decision was taken, that given the challenges with sending specimens to CAREC and the declining incidence, specimen collection would be suspended. Staff were advised that collection would recommence in the event that there was an increase in incidence or a change in the presentation (e.g. blood diarrhoea).
4. The outbreak was declared 'over' in Epidemiological Week 6 of 2012.

