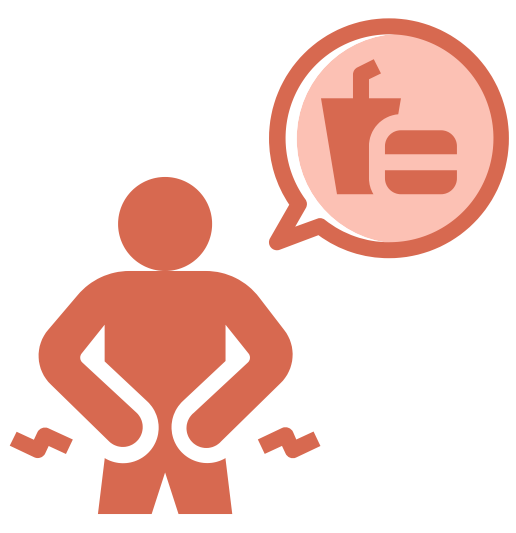


How initial interview data collected by local public health are used in enteric outbreak investigations

1. Symptom onset



When a person becomes ill with an enteric disease, they may seek medical care and submit a stool sample to their local laboratory. Confirmed case data are then sent to the local public health unit for follow-up.



2. ~1 week after onset

Local public health practitioners conduct the initial interview.



Initial interview data are critical

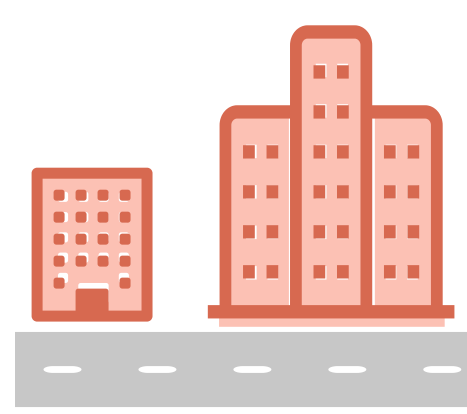
- Cases can forget details over time. First interviews are best for collecting reliable exposure information (e.g., product brands, purchase location, lot codes).
- Data can help identify early signals on suspect sources and inform focused questionnaires.
- High quality data reduce the amount of follow-up required in outbreak investigations.
- Leftover product for sampling is more likely to be available at first interview.



3.



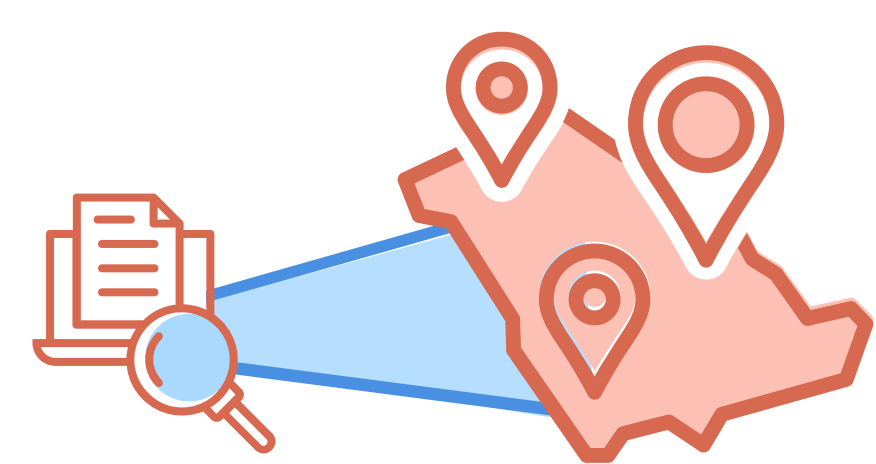
Collected data are entered and analyzed.



Data are used by local or provincial/territorial health units for surveillance and outbreak detection and assessment.



4. 4+ weeks after onset



Data extracts may also be requested by the Public Health Agency of Canada to investigate multi-jurisdictional outbreaks.

PUTTING IT ALL TOGETHER

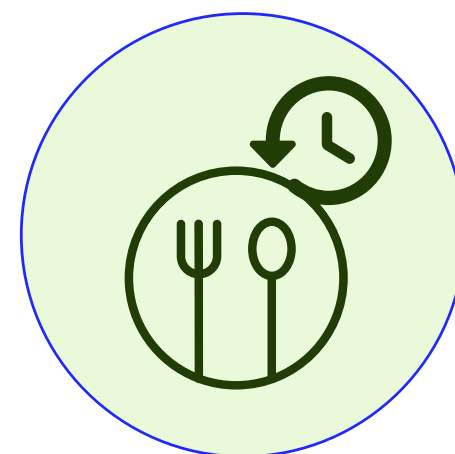
Initial case interview data support the detection and assessment of common source outbreaks.

High quality exposure data from initial case interviews can help investigators quickly identify the source of an outbreak and trigger public health action, even if the outbreak strain is not detected in the source.

High quality exposure data



Food safety investigation data



Epidemiological evidence



Public health action



This is why local public health plays a key role in outbreak investigations!

