Westigtes State Equipment of Health	Fax completed form Communicable Dise Epidemiology		//	nitial notification to DO		LHJ Clust	er #: <u>2615</u> er Name: みしと つ	
	Fax: 206-418-5515	out the	1940		جررور		reak#:	
Outbreak Repor	ting Form – F	ood	Form Sta	atus Preliminary report; in p	maress		-	
Disease				inal report	nogress	NORS#:		
REPORTING AGENCY IN	IFORMATION					indiring h		4. 5. 4.
Local health jurisdiction (L	HJ) PHSK	C	In	itial LHJ notification d	late & time	815115	źa	am/pm
Contact person			N	otified by:las	y 5			
Contact person phone (lr	otined by.	& time 3/	school, daycar	e, lab, etc.)	am/pm
Lead agency PH	SK.C.			vestigation completio				
INVESTIGATION METHO		(ylqq	MXI/Head				NAME:	A MANAGEMENT
Interviews only of ill pe	Shines of the same	DESTRUCTION	TT [eated or untreated re	creational wa	ater venue a	assessment	
Case-control study				vestigation at factory/				. 1
Cohort study				vestigation at original god product or bottled			er source, etc)
Food preparation review Water system assess				nvironment/food/wate				
Water system assessi		er	4.00	ther			· · ·	
If applicable, attach furthe			ve activities a	nd tools (e.g. epidem	îc curves, qu	estionnaire	s, case defin	itions)
DATES (mm/dd/yyyy)		450 10				14 PK 177	Her lexter	
Date first case became ill		D	ote last case	became ill: 7 /31 /	15	Ladida THESSELLERA	Data de Line	and Page 200
Date of initial exposure:				posure://			a data	in k
GEOGRAPHIC LOCATION	MC TO BE TO THE TOTAL OF THE TO		THE CHILDS CA	n 21 JANES - MARKET PORTER	17 24 Char			M. A. Bri
Place of Exposure (e.g., /	Nome & City of metau	ront) (Chiral	to - Harry	and M	nanke	ナ	
County of exposure:	Kin 0	or 🗆 F	xposure occi	urred in multiple count	tles, please i	ist:		
County of exposure.		. У. Ш. ^L	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and the same and the	, p			
County of cases' residence	co: King	or 🗌 C	Cases resided	I in multiple counties,	please list:		4	
PRIMARY CASES			r Sandrija Voje estas		.#/REQ19524			
Number of Primary Cas			4	5		Sex (estimated % of the primary cases)		
# Lab-confirmed cases			5		Male		40	%
# Probable cases			<u> </u>		Female	20 pt 10 pt 10 pt	60	%
# Estimated total primary ill			and the same of the party of th	5		Approx % of primary cases by age		
612 - 1215 217 - 1212 (1986) 1825 (1986)				Fotal # for whom info is available	great Con			
# Died			0	<u> </u>	<1 yr	%	20-49 yrs	100 %
# Hospitalized			3	_5	1-4 yrs	%	50-74 yrs	%
# Visited emergency room			J.	<u> </u>	5-9 yrs	%	≥75 yrs Unknown	%
# Visited health care prov			0	DURATION OF ILI	10-19 yrs	MARY CAS		1 70 2 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
INCUBATION PERIOD (Shortest	PRIMARY CASES U		urs, Days	Shortest	LITE OF (FIXE	UMINT ONO		urs, Days
Median			urs, Days	Median				urs, Days

Min, Hours, Days

Min, Hours, Days

Longest
Total # of cases or whom info available

M Unknown duration of illness

Unknown incubation period

Total # of cases or whom info available

Longest

	SES ONLY	The state of the s		9 3 1			The state of the s	
Feature	# cas	ses with signs	or symptom	s	Total	# cases for v	vhom info available	
Vomiting		3 -				\triangle		
Diarrhea		5	*				1	
Bloody stools	W.	5						
Fever		2						
Abdominal cramps		-5			5			
HUS		Ø				1		
Asymptomatic		Ø						
W -						V	· · · · · · · · · · · · · · · · · · ·	
SECONDARY CASES	7,3	" - 83° -6		730	, F-612		TEN 15 15 4 5	
Mode of secondary transmission (che	ck all that	apply)	Number	of seconda	rv cases	3		
☐ Food ☐ Water ☐ Animal cont		erson-to-		firmed seco				
person	ari M.	612011-10-		e secondar			1 1/2	
☐ Environmental contamination other that	an food/wat	lor ·	A CONTRACTOR OF THE PARTY OF TH	condary cas			1	
1.0	an ioou/wai	ICI		ises (Primar		andon)		
☐ Indeterminate/Other/Unknown			Total # Ca	ises (Pilmai	y + 500	ondary)	5	
TOTAL CASES (PRIMARY AND SECO	NDARY):	_5_						
LABORATORY		18.5		100	75			
Is the etiologic agent laboratory confi	rmed? 🔀	Yes 🗌 No					he following agent is	
If etiology is not laboratory confirmed, we	re patient s	specimens				iologic eviden		
collected? Yes, # collected	☐ No		📗 Bacterial	_	_	rial infection	☐ Virus	
			Chemica		Other	VA-11	_ Unknown	
Genus Species	Serotype		d outbreak			Detected.	# Lab- confirmed	
	rabe.	etiology		characte	ristics	in*	cases	
Escheridia Oli	0757:1	17 Yes					F	
The second secon	013113			ļ				
		Yes						
*Detected in (choose all that apply) 1 – pa		Yes	specimen 3	environm	ent spec	cimen 4 – fo	ood worker specimen	
*Detected in (choose all that apply) 1 – pa	itient specin	Yes	specimen 3	environm	ent spec	cimen 4 – fo	ood worker specimen	
*Detected in (choose all that apply) 1 – pa	itient specin	Yes	specimen 3	environm	ent spec	simen 4 fo	ood worker specimen	
*Detected in (choose all that apply) 1 – pa	itient specin	Yes men 2 – food	specimen 3		ent spec	cimen 4-fo	ood worker specimen	
*Detected in (choose all that apply) 1 – pa DOH USE ONLY: FOOD-SPECIFIC DATA	itient specin	Yes men 2 – food			ent spec		ood worker specimen	
*Detected in (choose all that apply) 1 – pa DOH USE ONLY: FOOD-SPECIFIC DATA Food vehicle undetermined	Total # of	Yes nen 2 – food cases exposed					ood worker specimen	
*Detected in (choose all that apply) 1 – pa DOH USE ONLY: FOOD-SPECIFIC DATA Food vehicle undetermined Name of food (excluding any preparation	Total # of	Yes nen 2 – food cases exposed					ood worker specimen	
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CONTROL OF THE STATE OF THE STA	CALLEGE STREET, AND THE STREET	EQUIVOR A TORANS AND OVERSHIE SPECIES OF SERVICES	SECTION TO SECURITION OF SECUR				
Location where food was prepare (Check all that apply)	d	Location of exposure (where for (Check all that apply)	od was eaten)				
Restaurant – 'Fast food' (drive-up service or pay at counter)	☐ Nursing home, assisted living facility, home care	Restaurant 'Fast food' (drive-up service or pay at counter)	☐ Nursing home, assisted living facility, home care				
☐ Restaurant – Sit-down dining	☐ Hospital	☐ Restaurant - Sit-down dining	☐ Hospital				
☐ Restaurant – Other or unknown type	☐ Child day care center	☐ Restaurant – Other or unknown type	☐ Child day care center				
☐ Private home	☐ School	☐ Private home	☐ School				
☐ Banquet facility (food prepared and served on site)	☐ Prison, jail	☐ Banquet facility (food prepared and served on site)	☐ Prison, jail				
☐ Caterer (food prepared off-site from where served)	☐ Church, temple, religious location	☐ Caterer (food prepared off- site from where served)	☐ Church, temple, religious location				
☐ Fair, festival, other temporary or mobile services	☐ Camp	☐ Fair, festival, other temporary or mobile services	☐ Camp				
☐ Grocery store	☐ Picnic	☐ Grocery store	☐ Picnic				
☐ Workplace, not cafeteria	Other (describe below)	☐ Workplace, not cafeteria	☐ Other (describe below)				
☐ Workplace, cafeteria	□ Unknown	☐ Workplace, cafeteria	☐ Unknown				
Remarks:		Remarks:	1				
Contract of Contract Contract							
	Conference of the conference o	<u> </u>					
FOOD WORKERS	repaired to account to the second						
Was food-worker implicated as the		es kg No					
If yes, please check one o		6 3					
☐ Laboratory and epi			. *				
☐ Epidemiologic evid☐ Laboratory evidence							
PUBLIC HEALTH ACTIONS AND		en der de englesellen in 1720 f.C.					
Health education information pr	ALCOHOL STATE OF THE STATE OF T	24 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	AND TANKETER IN THE SOUR SOL				
The state of the s		cluded during contagious period if ne	ecessary				
& Employers	1 6	Nee: Pr	E COC.				
A Proposed	The same	70					
			*				
DISCUSSION / CONCLUSION	ender Benedetter zerschier (est	no consesso Talianta de Caldada	LOUGHT CONTRACTOR				
DISCUSSION / CONCLUSION			Story of the second state of the second				
Please briefly summarize the finding	gs of this outbreak investigation	•					
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EH Field Investigation Form (Page 1997)	art 2) attached, if relevant	Supporting documentation a	ittached, if relevant				
Red/Blue Form attached, if relevant							

		ING FACTORS ion Factors (check all that apply)	Pro	liferation	Amplification Factors (check all that apply)
COI	itammat	ion Factors (check all that apply)			Food preparation practices that support
	C1	Toxic substance part of tissue		P1	proliferation of pathogens (during food preparation)
	C2	Poisonous substance intentionally/deliberately added		P2	No attempt was made to control the temperature of implicated food or the length of time food was out of temperature control (during food service or display of food)
	C3	Poisonous or physical substance accidentally/inadvertently added		P3	Improper adherence of approved plan to use Time as a Public Health Control
	C4	Addition of excessive quantities of ingredients that are toxic in large amounts		P4	Improper cold holding due to malfunctioning refrigeration equipment
	C5	Toxic container	۵	P5	Improper cold holding due to an improper procedure or protocol
	C6	Contaminated raw product – food was intended to be consumed after a kill step		P6	Improper hot holding due to matfunctioning equipment
×	C7	Contaminated raw product – food was intended to be consumed raw or undercooked/underprocessed	D	P7	Improper hot holding due to improper procedure or protocol
	C8	Foods originating from sources shown to be contaminated or polluted (such as a growing field or harvest area)		P8	Improper/slow cooling
	C9 +	Cross-contamination of ingredients (cross-contamination does not include ill food workers)		P9 ·	Prolonged cold storage
	C10	Bare-hand contact by a food handler/worker/preparer who is suspected to be infectious		P10	Inadequate modified atmosphere packaging
	C11	Glove-hand contact by a food handler/worker/preparer who is suspected to be infectious		P11	Inadequate processing (acidification, water activity, fermentation)
	C12	Other mode of contamination (excluding cross- contamination) by a food handler/worker/preparer who is suspected to be infectious	0	P12	Other situations that promoted or allowed microbial growth or toxic production
	C13	Foods contaminated by non-food handler/worker/preparer who is suspected to be infectious		P-N/A	Proliferation/Amplification Factors - Not Applicable
	C14	Storage in contaminated environment			
	C15	Other source of contamination (e.g., hand washing)		Contribut	ting factors unknown
	C-N/A	Contamination Factors Not Applicable		JR.	
Su	rvival Fa	ctors (check all that apply)	25.		
	S1	Insufficient time and/or temperature control during initial cooking/heat processing		S4	Insufficient or improper use of chemical processes designed for pathogen destruction
	\$2	Insufficient time and/or temperature during reheating		S5	Other process failures that permit pathogen survival
	S3	Insufficient time/temperature control during freezing		S-N/A	Survival Factors - Not Applicable
Th	e confirm	ned or suspected point of contamination (check one)::	1 200	
X	Before p	preparation Preparation If 'before	prep	paration': [□ Pre-harvest □ Processing □ Unknown
Re	ason sus	spected (check all that apply)			
X	Environ	mental evidence 🔲 Laboratory evidence 🔀 Epide	miol	ogic evide	nce Prior experience makes this a likely source
7	A:	itical modations	1	2004	a during Fit would

Last revised 03/2014 DOH #420-022 Outbreak Reporting Form: Food

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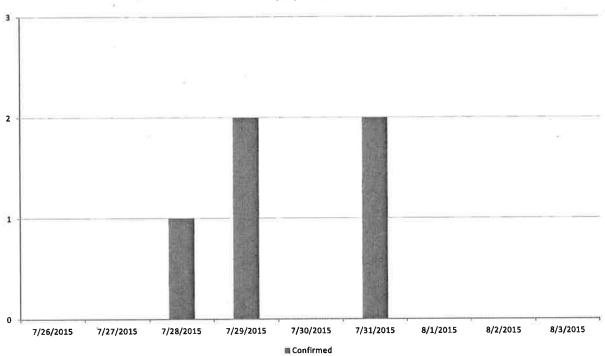
E. Coli O157:H7 EXHX01.0012 (1st), EXHA26.1779 (2nd) Chipotle Cluster WA State, July 2015

Descriptive Epi

		%
Median Age	22 (range 20-28 years)	
Female	3/5	60%
Hospitalized	2/5	40%
Deaths	None	

- 5 of 5 cases were indistinguishable by PFGE 1st and 2nd enzyme: EXHX01.0012, EXHA26.1779
 - PFGE pattern not previously seen in King County
- One case co-infected with Salmonella | 4,5,12:i:-
 - · Possible lab error?

PHSKC Confirmed Cases of *E. coli* O157:H7 Associated with Chipotle by Onset Date



Exposure Data

- All five cases ate at same Chipotle franchise in Seattle
- At least two cases ate there multiple times during exposure period
- · One case also ate at another Chipotle location

Menu Items

- Each case reported eating a different menu item:
 - Pork burrito
 - Grilled steak bowl
 - Grilled chicken bowl
 - Black bean bowl
 - Quesadilla
- Common ingredients: cilantro lime rice, pico de gallo, beans, guacamole, corn

Environmental Health

- No critical violations observed during field investigation
- Source information obtained for common ingredients
 - Cilantro from Taylor Farms in CA (supplier for ~40% cilantro for Chipotle nationwide)

Employee Follow Up

- One employee identified with mild diarrheal illness, onset 8/3 (after cases)
- Chipotle corporate wellness staff elected to conduct single stool test for enteric pathogens for all employees of implicated location – all were negative (N=10)