

Foodborne Diseases and Conditions Designated as Notifiable at the National Level – United States 2003

In the United States, requirements for reporting diseases and conditions are mandated by state and territorial laws and/or regulations. However, physicians are highly encouraged to report foodborne illness that they may encounter in the event that an outbreak situation may be present. Reporting will facilitate the tracking of the outbreak and in fact, the case identified may even be the sentinel case!

Differences exist between states and territories as to which diseases and conditions are reportable. The Council of State and Territorial Epidemiologists (CSTE) and the Centers for Disease Control and Prevention (CDC) collaborate on which diseases and conditions are designated as nationally notifiable. Details on specific state requirements are located at www.cste.org/nndss/reportingrequirements.htm.

This information is also available by contacting CSTE at:

The Council of State and Territorial Epidemiologists (CSTE)
Suite 303 – 2872 Woodcock Boulevard
Atlanta, Georgia 30341
Phone: 770 458-3811

Notifiable Bacterial Foodborne Diseases and Conditions

Anthrax
Botulism
Brucellosis
Cholera
Enterohemorrhagic *Escherichia coli*
Hemolytic uremic syndrome, post-diarrheal
Listeriosis
Salmonellosis (other than *S. Typhi*)
Shigellosis
Typhoid fever (*S. Typhi* and *S. Paratyphi* infections)

Notifiable Viral Foodborne Diseases and Conditions

Hepatitis A

Notifiable Parasitic Foodborne Diseases and Conditions

Cryptosporidiosis
Cyclosporiasis
Giardiasis
Trichinellosis

References

Council of State and Territorial Epidemiologists.
Available at:
www.cste.org/nndss/reportingrequirements.htm
Centers for Disease Control and Prevention. Available at www.cdc.gov/epo/dphsi/phs/infdis2003.htm

Toll-free Information Phone Numbers

USDA Meat and Poultry Hotline:
800 535-4555
FDA Safe Food Hotline:
888 SAFE-FOOD (723-3366)
CDC Voice Information System:
888 CDC-FAXX (232-3299)

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Diagnosis and Management of Foodborne Illnesses

A Primer for Physicians and Other Health Care Professionals

Foodborne Illnesses Table: Viral Agents

American Medical Association
American Nurses Association-American Nurses Foundation
Centers for Disease Control and Prevention
Center for Food Safety and Applied Nutrition
Food and Drug Administration
Food Safety and Inspection Service,
US Department of Agriculture

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Foodborne Illnesses (Viral)

Etiology	Incubation Period	Signs and Symptoms	Duration of Illness	Associated Foods	Laboratory Testing	Treatment
Hepatitis A	28 days average (15-50 days)	Diarrhea, dark urine, jaundice, and flu-like symptoms, i.e., fever, headache, nausea, and abdominal pain.	Variable, 2 weeks-3 months	Shellfish harvested from contaminated waters, raw produce, contaminated drinking water, uncooked foods and cooked foods that are not reheated after contact with infected food handler.	Increase in ALT, bilirubin. Positive IgM and anti-hepatitis A antibodies.	Supportive care. Prevention with immunization.
Noroviruses (and other caliciviruses)	12-48 hrs	Nausea, vomiting, abdominal cramping, diarrhea, fever, myalgia, and some headache. Diarrhea is more prevalent in adults and vomiting is more prevalent in children.	12-60 hrs	Shellfish, fecally contaminated foods, ready-to-eat foods touched by infected food workers (salads, sandwiches, ice, cookies, fruit).	Routine RT-PCR and EM on fresh unpreserved stool samples. Clinical diagnosis, negative bacterial cultures. Stool is negative for WBCs.	Supportive care such as rehydration. Good hygiene.
Rotavirus	1-3 days	Vomiting, watery diarrhea, low-grade fever. Temporary lactose intolerance may occur. Infants and children, elderly, and immunocompromised are especially vulnerable.	4-8 days	Fecally contaminated foods. Ready-to-eat foods touched by infected food workers (salads, fruits).	Identification of virus in stool via immunoassay.	Supportive care. Severe diarrhea may require fluid and electrolyte replacement.
Other viral agents (astroviruses, adenoviruses, parvoviruses)	10-70 hrs	Nausea, vomiting, diarrhea, malaise, abdominal pain, headache, fever.	2-9 days	Fecally contaminated foods. Ready-to-eat foods touched by infected food workers. Some shellfish.	Identification of the virus in early acute stool samples. Serology. Commercial ELISA kits are now available for adenoviruses and astroviruses.	Supportive care, usually mild, self-limiting. Good hygiene.
Etiology	Incubation Period	Signs and Symptoms	Duration of Illness	Associated Foods	Laboratory Testing	Treatment

Please call the state health department for more information on specific foodborne illnesses. These telephone numbers are available at: <http://www.cdc.gov/mmwr/international/relres.html>.

See the reverse side for information hotlines and list of notifiable diseases.