

Environmental Assessment Field Guide for Foodborne Illness Outbreaks

Suspect Agent or Pathogen of Concern & Corresponding Field Focus		Risk Factors & Interventions	Remediation & Control Measures
VIRUSES <div> <input type="checkbox"/> Norovirus* <input type="checkbox"/> Hepatitis A </div>		III Food Workers (III FW) <div> <input type="checkbox"/> Determine employee health status <input type="checkbox"/> Exclude III food workers <input type="checkbox"/> Check work schedules <input type="checkbox"/> Determine food workers' role with suspected meals or ingredients </div>	Who did you contact about the outbreak? <div> <input type="checkbox"/> Local Health CD-Epi <input type="checkbox"/> State Food Safety <input type="checkbox"/> State CD-Epi </div> <hr/> <i>Consider each item listed below and check each used.</i> <div> Control Measures <div> <input type="checkbox"/> Behavior Change <input type="checkbox"/> Procedure Change <input type="checkbox"/> Exclude III FW <input type="checkbox"/> Food Destruction <input type="checkbox"/> Hold Order <input type="checkbox"/> Cleaning & Sanitizing <input type="checkbox"/> Closure </div> Investigation Methods <div> <input type="checkbox"/> Food Samples <input type="checkbox"/> Environmental Samples <input type="checkbox"/> Stool Samples <input type="checkbox"/> Photographs <input type="checkbox"/> Receipts, Inventory, Trace-back <input type="checkbox"/> Multiple FEs Investigated <input type="checkbox"/> Additional Case Finding </div> Moving Forward <div> <input type="checkbox"/> Follow-Up Visit Scheduled <input type="checkbox"/> Follow-Up Visit with Interpreter <input type="checkbox"/> Increased Inspections <input type="checkbox"/> Menu Reduction <input type="checkbox"/> Required Ed/Training <input type="checkbox"/> Risk Control Plan <input type="checkbox"/> Office Conference </div> </div>
BACTERIAL TOXINS <div> <input type="checkbox"/> <i>Clostridium botulinum</i> <input type="checkbox"/> <i>Clostridium perfringens</i> <input type="checkbox"/> <i>Bacillus cereus</i> <input type="checkbox"/> <i>Staphylococcus aureus</i> </div>		Bare Hand Contact (BHC) <div> <input type="checkbox"/> Gloves/utensils available and signs of usage <input type="checkbox"/> History of bare hand contact prevention in establishment <input type="checkbox"/> Discussion of food preparation steps </div>	
BACTERIAL INFECTIONS <div> <input type="checkbox"/> <i>Escherichia coli</i> Enterohemorrhagic or Shiga toxin-producing <input type="checkbox"/> <i>Shigella spp</i> <input type="checkbox"/> <i>Campylobacter jejuni</i> <input type="checkbox"/> <i>Salmonella spp</i> <input type="checkbox"/> <i>Listeria monocytogenes</i> <input type="checkbox"/> <i>Yersinia enterocolitica</i> </div>		Handwashing (HW) <div> <input type="checkbox"/> Handwash sinks available and have soap and towels <input type="checkbox"/> Observe proper handwashing </div>	
PARASITES <div> <input type="checkbox"/> <i>Cryptosporidium parvum</i> <input type="checkbox"/> <i>Giardia lamblia</i> <input type="checkbox"/> <i>Trichinella spiralis</i> <input type="checkbox"/> <i>Cyclospora cayetanensis</i> <input type="checkbox"/> <i>Toxoplasma gondii</i> </div>		Cooling, Cold Holding (CH), Hot Holding (HH), Reheating (RH), Room Temperature Storage (RTS), Reduced Oxygen Packaging (ROP) <div> <input type="checkbox"/> Proper cold holding and hot holding <input type="checkbox"/> Proper cooling and reheating practices <input type="checkbox"/> History of cooling or reheating practices in establishment <input type="checkbox"/> History of proper temperature control practices <input type="checkbox"/> Reduced oxygen packaging products used in suspect menu <input type="checkbox"/> Presence of room temperature storage or advanced preparation </div>	
SEAFOOD TOXINS & INFECTIONS <div> <input type="checkbox"/> Scombroid fish poisoning *When shellfish is implicated, use the Environmental Assessment Field Guide for Molluscan Shellfish Illness. </div>		Cooking, Cross Contamination (XC), Consumer Advisory (CA) <div> <input type="checkbox"/> Proper storage of raw meats <input type="checkbox"/> Separation of utensils used for raw product <input type="checkbox"/> Cleaning and sanitizing of equipment and utensils <input type="checkbox"/> Menu with proper consumer advisory <input type="checkbox"/> Calibrated digital thermometer readily available <input type="checkbox"/> Cooking methods validated and logs checked </div>	
FIELD FOCUS <div> <input type="checkbox"/> III FW <input type="checkbox"/> BHC <input type="checkbox"/> HW </div>		Produce Washing <div> <input type="checkbox"/> Clean, sanitized sink available <input type="checkbox"/> Proper process observed or discussed <input type="checkbox"/> Suspect products sources identified </div>	
FIELD FOCUS <div> <input type="checkbox"/> Cooling <input type="checkbox"/> HH <input type="checkbox"/> RH <input type="checkbox"/> RTS <input type="checkbox"/> ROP </div>		Source <div> <input type="checkbox"/> Copies of relevant tags, receipts, invoices <input type="checkbox"/> Approved water source </div>	
FIELD FOCUS <div> <input type="checkbox"/> III FW <input type="checkbox"/> HW <input type="checkbox"/> CH <input type="checkbox"/> Cooking <input type="checkbox"/> XC <input type="checkbox"/> CA <input type="checkbox"/> Produce Washing <input type="checkbox"/> Source </div>			

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Suspect Agent or Pathogen of Concern & Corresponding Field Focus		Risk Factors & Interventions	Remediation & Control Measures
VIRUSES	FIELD FOCUS		
<input type="checkbox"/> Norovirus	<input type="checkbox"/> Ill FW <input type="checkbox"/> BHC <input type="checkbox"/> HW <input type="checkbox"/> Source <input type="checkbox"/> CA	Ill Food Workers (Ill FW) <input type="checkbox"/> Determine employee health status <input type="checkbox"/> Exclude Ill food workers <input type="checkbox"/> Check work schedules <input type="checkbox"/> Determine food workers' role with suspected meals or ingredients Bare Hand Contact (BHC) <input type="checkbox"/> Gloves/utensils available and signs of usage <input type="checkbox"/> History of BHC prevention in establishment <input type="checkbox"/> Observations of BHC during the investigation <input type="checkbox"/> Discussion of BHC prevention for implicated meal <input type="checkbox"/> Discussion of food preparation steps Handwashing (HW) <input type="checkbox"/> Handwash sinks available and have soap and towels <input type="checkbox"/> Observe proper HW Cold Holding (CH) <input type="checkbox"/> Proper CH at Receiving, Storage, Prep, Service <input type="checkbox"/> History of proper temperature control practices <input type="checkbox"/> Advanced preparation Cross Contamination (XC) <input type="checkbox"/> Proper storage of other foods <input type="checkbox"/> Separation of utensils used for raw product <input type="checkbox"/> Cleaning and sanitizing of equipment and utensils <input type="checkbox"/> Discuss XC prevention during implicated meal Consumer Advisory (CA) <input type="checkbox"/> Disclosure <input type="checkbox"/> Reminder Source <input type="checkbox"/> Copies of relevant tags, receipts, invoices (See Additional Resources: Anatomy of Shellstock Tags and Interstate Certified Shellfish Shippers List)	Who did you contact about the outbreak? <input type="checkbox"/> Local Health CD-Epi <input type="checkbox"/> State Food Safety <input type="checkbox"/> State CD-Epi <input type="checkbox"/> State Shellfish Program <i>Consider each item listed below and check each used.</i> Control Measures <input type="checkbox"/> Behavior Change <input type="checkbox"/> Procedure Change <input type="checkbox"/> Exclude Ill FW <input type="checkbox"/> Food Destruction <input type="checkbox"/> Hold Order <input type="checkbox"/> Cleaning & Sanitizing <input type="checkbox"/> Closure Investigation Methods <input type="checkbox"/> Food Samples <input type="checkbox"/> Environmental Samples <input type="checkbox"/> Stool Samples <input type="checkbox"/> Photographs <input type="checkbox"/> Receipts, Inventory, Trace-back <input type="checkbox"/> Multiple FEs Investigated <input type="checkbox"/> Additional Case Finding Moving Forward <input type="checkbox"/> Follow-Up Visit Scheduled <input type="checkbox"/> Follow-Up Visit with Interpreter <input type="checkbox"/> Increased Inspections <input type="checkbox"/> Menu Reduction <input type="checkbox"/> Required Ed/Training <input type="checkbox"/> Risk Control Plan <input type="checkbox"/> Office Conference
BACTERIAL INFECTIONS	FIELD FOCUS		
<input type="checkbox"/> <i>Vibrio</i> species	<input type="checkbox"/> CH <input type="checkbox"/> XC <input type="checkbox"/> Source <input type="checkbox"/> CA		
SHELLFISH TOXINS	FIELD FOCUS		
<input type="checkbox"/> Shellfish Poisoning ASP , DSP , PSP	<input type="checkbox"/> Source		
Additional Resources		www.foodprotect.org/issues/packets/2023packet/attachments/I_001_content_h.pdf www.fda.gov/food/federalstate-food-programs/interstate-certified-shellfish-shippers-list	