

**GASTROENTERITIS (NOROVIRUS) OUTBREAK REPORT FORM FOR  
HEALTHCARE AND RESIDENTIAL FACILITIES**

Outbreaks should be reported to the local or state health department within 24 hours of being identified. When the outbreak has ended, please complete and fax this form to CDPHE or your local health department; attach additional comments, epi-curve, and/or outbreak report if available.

Reported by: \_\_\_\_\_  
Agency: \_\_\_\_\_ Title: \_\_\_\_\_

Facility name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_  
County: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Facility contact person/title: \_\_\_\_\_

Facility type (check all that apply):  Skilled nursing  Assisted living  Rehabilitation  
 Independent living  Acute care hospital  Other: \_\_\_\_\_

Facility census at start of outbreak: # Residents \_\_\_\_\_ # Employees \_\_\_\_\_

Date of first illness onset: \_\_\_\_\_ Date of last illness onset: \_\_\_\_\_

Total number of ill residents: \_\_\_\_\_

Total number of ill staff: \_\_\_\_\_

Number of persons hospitalized: \_\_\_\_\_ Number of deaths: \_\_\_\_\_

Shortest duration of illness: \_\_\_\_\_ Longest duration of illness: \_\_\_\_\_ Median duration: \_\_\_\_\_

Primary route of transmission:  Person-to-person  Food/water\*  Other: \_\_\_\_\_

\*If foodborne/waterborne is suspected, contact CDPHE immediately. More complete investigation is needed.

Symptoms	# Residents	# Employees
Abdominal cramps		
Fever		
Diarrhea		
Bloody diarrhea		
Vomiting		
Headache		
Other:		
<b>Total people for whom this information was collected</b>		

Were stool specimens submitted to a laboratory for testing?  Yes  No

If yes, where:  CDPHE (state) lab  Other lab: \_\_\_\_\_

Date submitted (earliest date, if submitted on multiple days): \_\_\_\_\_

Stool Test Summary			
Type of Test	Total # tested	Total # positive	Organism found
Norovirus PCR			
Bacterial culture			
Other:			

Fax completed form to: **Colorado Department of Public Health and Environment (CDPHE)**  
**(303) 782-0338**  
**(Or to your local public health department)**

Questions? Call CDPHE at (303) 692-2700

Please go to: [www.colorado.gov/cs/Satellite/CDPHE-DCEED/CBON/1251607755294](http://www.colorado.gov/cs/Satellite/CDPHE-DCEED/CBON/1251607755294) for complete guidance.