

## Cyclosporiasis Investigation Checklist for Local Health Departments

Local health department staff should follow these steps, not necessarily always in order, when investigating reports of cyclosporiasis. For more detailed information refer to the [Communicable Disease Chapter](#). Cyclosporiasis is a Priority Level 3 disease and critical details should be entered into the Communicable Disease Reporting and Surveillance System (CDRSS) within 5 days.

- Review laboratory details to confirm the test result. If the case has not been submitted via CDRSS, create a case.
- Interview the case patient (parent/guardian if case patient is a minor) via phone using the [Cyclosporiasis National Hypothesis Generating Questionnaire \(CNHGQ\)](#). Do not fax the form to the physician or mail to the home of the case patient for completion.
- Provide education to the case patient; additional information can be found on the NJDOH and CDC disease pages.
- Enter critical details (demographics, signs/symptoms, clinical status, additional laboratory information, and industry/occupation) into the CDRSS case.
- Enter relevant exposures (travel, food history especially fresh produce, grocery stores, shopper card details, restaurants) into the *Sources of Infection and Risk Factors* section within the CDRSS case.
- Notify the appropriate local health department and document in CDRSS if a food establishment, restaurant, etc. from another jurisdiction is identified as a possible source of exposure.
- Inform the Foodborne and Waterborne Disease Unit at [cds.fwd.epi@doh.nj.gov](mailto:cds.fwd.epi@doh.nj.gov) if an outbreak is suspected.
- Enter any additional symptomatic contacts identified through the interview into the *Contract Tracing* section within CDRSS and follow case investigation as appropriate.
- Submit the completed Cyclosporiasis National Hypothesis Generating Questionnaire (CNHGQ) via email to the Foodborne and Waterborne Disease Unit at [cds.fwd.epi@doh.nj.gov](mailto:cds.fwd.epi@doh.nj.gov) or fax to 609-826-5972 or 609-292-5811.
- Document dates/times of at least three attempts made to reach the case patient into the *Sources of Infection and Risk Factors* section within CDRSS if they remain unreachable.
- Determine *Case Status* based on [NNDSS case definitions](#) and mark *Report Status* as “LHD CLOSED” in CDRSS.