## Appendix D: Case investigation form

NOTIFICATION	Date notified			
	Notifier name			
	Notifier organisation			
	Telephone			
	Email			
	Treating doctor			
	Telephone			
	Email			
INTERVIEW	Was the case interviewed?	Yes	No	N/A
	If case not interviewed, state who was interviewed and their relationship to the case Date of first interview			
	Name of interviewer			
	Telephone number of interviewer			
CASE DETAILS	Case reference number			
	Name (first name, surname)			
	Date of birth			
	Age (years/months)			
	Sex	Male		Female
	Occupation			<u> </u>
	Preferred language			
	Address (permanent)			
	Address – temporary (if different from permanent address)			

	Telephone (home)						
	Telephone (mobile)						
	E-mail						
		Aboriginal Torres Strait Islander Both Aboriginal and Torres Strait Islander					
	Indigenous status						
		Not Aboriginal Unknown	or Torre	es Strait	Islander		
	Country of citizenship						
CLINICAL DETAILS	Date of symptom onset						
	Initial symptoms	Fever	Backad	che	Malaise		
		Headache	Abdon pain	ninal	Prostration		
		Vomiting	Vesicu rash	lar			
	If rash is present, specify its	□ Mouth	□ Legs		-		
	location						
		Arms Torso   Palms   Yes			0150		
	If rash is present, do all						
	lesions on one body section look the same age?						
	Other symptoms (specify)						
	Maximum temperature						
	Category of illness	Suspected	Probable Confi		Confirmed		
	Interview (insert date) 24 hours (insert date)						
	48 hours (insert date)						
	72 hours (insert date)						
	Date of report	Yes No					
	Was the case a contact of another case?						
	If yes, provide contact			1			
	identification number or						
	name and address						
	Infectious diseases physician	n					
	name and contact						

HOSPITAL AND	Hospitalised	Yes	No	Unknown		
TREATMENT						
DETAILS	Date admitted					
	Date discharged					
	Name of hospital (specify)					
	Isolated in single room	Yes Date/time:	No	Unknown		
	Admitted to ICU or HDU	ICU HDU		Unknown		
	Date admitted to ICU or HDU					
	Date discharged					
Ουτςομε	Patient outcome	Alive	Dead	Unknown		
	Date outcome information					
	sought					
LABORATORY	Specimens collected	Blood / Serun	d / Vesicle crust			
CRITERIA	Date collected	/				
	Laboratory that received	atory that received				
	specimens					
	Specimens transferred to	Yes No	Unknown			
	NHSQL or LRN member					
	laboratory Isolation of virus	Yes No Unknown				
		Yes No Unknown				
	Detection of virus by	Nucleic acid testing/				
		electron microscopy				
MEDICAL AND	Smallpox vaccine given prior	Yes No				
VACCINATION	to this outbreak?	Date				
HISTORY		vaccine receiv				
	Smallpox vaccine given Yes No					
	during this outbreak?	Date .				
	Due evictive weedlagt	vaccine receiv	/ed			
	Pre-existing medical conditions (specify)					
	Immunosuppressive	Yes No				
	disorders or treatment					
	(specify)					
	Infectious period	Date				
	Onset date (=t)					
	Earliest date for start of					
	incubation period (=t-14					

days)	Date
Epidemiological links to other cases (include case	Case reference number
reference numbers)	Case reference number
	Case reference number
	Case reference number

## **Contact classification**

**Higher risk primary contacts** of a suspected, probable and confirmed smallpox case include:

- **Household-like contacts**: all persons usually resident or who have spent substantial periods of time within the same household during the infectious period. Includes sexual contacts.
- Face-to-face contacts: all unvaccinated<sup>7</sup> persons who were not wearing appropriate PPE equipment (or where a PPE breach occurred) who have had prolonged interactions (≥ 15 minutes) with an infectious case of smallpox within a distance of 2 metres. These may include contacts at work, in social settings, and healthcare and emergency workers.
- Fomite contacts: all unvaccinated<sup>4</sup> persons who were not wearing appropriate PPE (or where a PPE breach occurred) who have had direct contact with clothing or articles that have recently been used by an infectious case of smallpox. These may include contacts at work, in social settings, and healthcare and emergency workers.
- **Vaccination contraindicated/failure**: lower risk primary contacts who are unable to be vaccinated or who do not have a successful vaccination<sup>8</sup>.
- Virus release contacts: all unvaccinated<sup>4</sup> persons in the vicinity of a release of variola virus.
- **Laboratory contacts**: Hazard level 3 and 4 laboratory contacts. See "Laboratory personnel contact management guidance" in "Section 10: Contact Management" of the SoNG.

Lower risk primary contacts of a suspected, probable and confirmed smallpox case include:

- Aerosol contacts: all persons who have had brief interactions (<15 minutes) with an infectious case of smallpox within a distance of 2 metres, or any interactions (for ≥15 minutes) at a distance of >2 metres within a room or enclosed space. People who have spent ≥15 minutes in an adjacent room or floor with shared air-conditioning (without HEPA filtration). These may include work colleagues, and people who have visited the same premises or travelled on the same public transport (such as buses, trains and planes) as an infectious smallpox case.
- **Non-laboratory contacts wearing PPE**: persons with contact with an infectious case of smallpox or their fomites whilst wearing appropriate PPE.
- **Previously vaccinated persons**: persons who have been successfully vaccinated within the previous 3 years who have had face-to-face or fomite contact with an infectious case of smallpox.
- Laboratory contacts: Hazard level 1 and 2 laboratory contacts (level 1 does not require isolation or monitoring). See "Laboratory personnel contact management guidance" in "Section 10: Contact Management" of the SoNG.

**Secondary contacts (household-like contacts of higher risk primary contacts)** of a suspected, probable and confirmed smallpox case include:

• all persons usually resident or who would be expected to spend substantial periods of time within the same household as the higher risk primary contact during the potential infectious period (i.e. should the higher risk primary contact become at case). Includes sexual contacts.

<sup>&</sup>lt;sup>7</sup> Contacts are classified as unvaccinated if they have not been successfully vaccinated against smallpox within the past 3 years. A successful vaccination requires a confirmed 'take' or major reaction indicating immunity.

<sup>&</sup>lt;sup>8</sup> Contacts who would otherwise be lower risk primary contacts but who are unable to be vaccinated and are now classified as a higher risk primary contact do not need to be managed as a higher primary risk contact regarding vaccination.

## MOVEMENTS DURING INFECTIOUS PERIOD

Make at least 6 copies of this page before interview with the case: one for the day before symptoms (t - 1), one for the day of onset (t), one for each of the next 4 days (t + 1, t + 2, t + 3, t + 4).

T (day): \_\_\_\_\_ Date: \_\_\_/ \_\_\_/

Places visited	Names of place	Address of place	Phone ( <i>if</i> available)	Time
Place 1				
Place 2				
Place 3				
Place 4				
Place 5				
Place 6				

Contact ID number	Contact name	Contact address	Contact phone	Contact email	Place of contact (e.g. Place 1)	Type of contact (e.g. primary household- like)	Date(s) and time(s) of contact