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INTRODUCTION

This user training document provides instruction on how to create and complete a report in the National Outbreak Reporting System (NORS).

CREATE A NEW REPORT

A new report can be created in NORS through either the Quick Start menu on the homepage or through the Reports page, by clicking the link labeled "+ New Report" as shown below.

N	DRS -		۵
≡		Quick Start	Welcome to NORS
	Home Reports Data Views Data Import	Find an existing report CDC or State ID Advanced search > Recently Opened	View more
	Home Reports	REPORTS All Reports –	
	Data Views Data Import	Drag a column header here to group by th	at column Q Search S Created C Owner M

A pop-up will appear containing the **REQUIRED FIELDS** to create a NORS report.

All 5 fields in this pop-up must be completed to save the record as a new report. Values may be updated within the data collection instrument if new information becomes available after further outbreak investigation.

New Report		×
State ID		
Date first case became ill		
mm/dd/yyyy		
Primary Cases		
Transmission Mode		
		~
Exposure State(s)		
Select		
	Cancel	Save

<u>State ID</u>: Enter the unique state-assigned identification number for the outbreak report. Each ID can be used only once for reports from your site.

Date first case became ill: When this field is selected, a calendar tool will be displayed. Enter the date the first known case became ill by selecting the date in the calendar tool or typing it in the text box using mm/dd/yyyy format.

<u>Primary Cases</u>: Enter the number of primary cases.

<u>Transmission Mode</u>: Select the primary mode of transmission in the drop-down menu.

Exposure State(s): When this field is selected, a select all that apply menu will appear. Click the name or corresponding checkbox of the state(s) where exposure occurred. If exposure occurred in a single state, but cases resided in multiple

states, only select the state where exposure occurred. Once you have made a selection, click anywhere in the browser window to exit the state menu.

To save the entered information as a new NORS record, click "Save." You will be redirected to the data collection instrument for the report.

ENTERING DATA IN A NORS REPORT

Navigation and Data Entry

To navigate through a NORS report, you can scroll through the entire report from the beginning or jump to a section of interest by selecting the section header from the navigation pane to the left of the data entry form. The current section will be highlighted in grey in the navigation pane.

🗅 Outbreak	Settings
Geographic Location	
Primary Cases	Setting(s) of Exposure
Secondary Cases	Settings where exposures occurred
Laboratory & Environmental	Animal shelter or sanctuary 🔀
Etiology and Isolates	
Settings	Setting of exposure remarks
Animal Contact	
Traceback & Recall	
Detection & Investigation	
Interventions	*
🗅 Remarks	Associated Events

Fields currently selected for data entry will appear with a blue highlight and blinking cursor. In the main data entry page, data are saved as it is entered or changed, including when data are cleared or deleted, as indicated by a temporary green checkmark and the word "Saved." Caluculated fields will update automatically.

Male (100.0%)	5	Male (41.7%)	5	
Female	=	Saved	7 🗘	
Unknown sex		Unknown sex		

In pop-ups with a blue "Save" button, changes are saved when you click "Save" or cleared when you click "Cancel".

Add States	×
Select items from list	
Q Search	
Alabama	
Alaska	
✓ Arizona	
Arkansas	
California	Click "Save" to
Colorado	save selections, or
Connecticut	"Cancel" to clear
Delaware	selections
2 selected	
	Cancel Save

In some pop-ups, you may not be able to delete or uncheck an option; to delete this data you must go back to the main data entry page by clicking "Cancel" and look for a "Minus" icon to clear the data from the corresponding table. See the section on "Relational Tables" below for more detail.

Add States ×		
Select items from list Search Alabama Alaska Arizona If previous entries are greyed out, california		
Colorado exit the pop-up	State	Case Count
Connecticut	Arizona	2
4 selected	Colorado	18 •
Cancel Save	Nevada	to delete rows

Updating Required Fields

The required fields—State ID, Date first case became ill, Primary Cases, Transmission Mode, and Exposure State(s)—may be changed at any time as new information becomes available. Once the record is created, Transmission Mode (Primary Mode of Transmission) and Date first case became ill can be found in the Outbreak section, Exposure State(s) can be found under Geographic Location, and Primary Cases (Estimated total primary cases) can be found under Primary Cases.

Changing the State ID

The State ID may be updated by the report owner on the right-hand side panel by clicking "Change." See below for additional information on updating the values displayed in the <u>Side Panel</u>.

Changing the Primary Mode of Transmission

To change the primary mode of transmission, click on the text box displaying the current selection. A pop-up will appear with a warning. If you would like to continue, select the new transmission mode from the drop-down and click "Save." Otherwise, click "Cancel."

If mode-specific data were entered prior to changing the mode of transmission, this information will be permanently deleted from

	×
Changing the mode of transmission may result in permanent Sections that do not pertain to the new mode will be removed	t loss of data. d.
Primary Mode of Transmission	
Animal contact	~
Cancel	Save

NORS. If you would like to save a copy of the report before changing the mode, you may do so by exporting an Excel or PDF file of the report, as described below.

Once the primary mode of transmission is changed, the sections and data fields for the new mode of transmission will be displayed on the data entry page. More information on mode-specific questions is provided in the next section.

Skip Patterns

The NORS data entry page contains skip patterns so that only data relevant to the selected characteristics of the outbreak are requested. This function allows for a more streamlined data entry page and is intended to eliminate confusion regarding when to answer certain questions.

Please be aware that data entered for questions that use a skip pattern may be deleted if the previous responses are changed.

For example, in the section on incubation period, selecting "Unknown incubation period" will hide the Incubation Period table. Data previously entered in the incubation period table will be deleted.

Incubation Period Among primary case	5				
Unknown incubation period					
Incubation Period	Number	Increment			
Shortest	12	Hours ~			
Median	24	Hours ~			
Longest	48	Hours ~			
·	[
	Incubation Period A	mong primary cases			
	Unknown incubati	ion period			
		Incul	Dation Period Among primary case.	s	-
			Jnknown incubation period		
		Incu	bation Period	Number	Increme
		Shor	test		
		Med	ian		
		Long	gest		

Mode-specific sections

Much of the skip logic in NORS branches directly from the mode of transmission. This table shows the sections in NORS and the modes for which they are available.

Section	Primary Mode of Transmission
Outbreak	All modes
Geographic Location	All modes
Primary Cases	All modes*
Secondary Cases	All modes*
Laboratory & Environmental	All modes*
Etiology and Isolates	All modes
Settings	All modes*
Animal Contact	Animal Contact only
Fungal Disease Outbreaks	Environmental Contamination only
Food	Food only
Traceback & Recall	Animal Contact and Food
Water	Water only
Detection & Investigation	All modes
Interventions	All modes*
Remarks	All modes
*Questions within section differ across modes.	

Logic Checks

Logic checks and integrated data cleaning are described in the **User Training Document for Integrated Data Cleaning**. Briefly, as data are entered in NORS, values are checked for logical errors and additional data checks, such as missing values, are tracked. Logical errors will be flagged with a pink banner directly in the data entry form and listed on the right-hand side panel with a blue X icon. Correcting the error will remove the warning from both locations. Some logic checks will prevent finalization of the report. Integrated data cleaning checks that do not involve logical errors will be flagged with a yellow banner in the data entry form and appear in the right-hand side panel without the blue X. These checks require validation during report finalization.

Dates	
Date first case became ill	Sharing 🔒 0 🏯 0 👻
12/5/2022	Status Active 🖉
Date last case became ill	• There are 16 incomplete entry items for this form.
12/02/2022	Qutbreak
• Last ill date cannot be prior to first ill date. ×	 Statistical Statistical Last III Date - Last ill date cannot be prior to first ill date.

Relational tables

Relational tables are used in NORS when multiple items are reportable for a given variable, and linked supporting information is needed for each item. For example, in a multistate outbreak, states are added as rows in a table, and the case count for each state is linked back to the corresponding state name. Other relational tables in NORS include Signs and Symptoms, Etiology, Isolates, Animal Vehicle, Food Vehicle, Water Settings, Linked CDC Systems, and Contributing Factors.



To add a row of data to a table, click the green "Add" icon to open and complete the pop-up.

To delete data from a table, click the red "Minus" icon to delete the entire row of data.

Edit To change the data in a relational data, select the blue, hyperlinked item from the row you would like to edit to open and make changes in the pop-up.

cases/cases with info

- 1. For sections with questions requiring the total # of cases detected and # of cases with info available, please complete both fields when information is available.
- 2. For "# cases with info available", enter the number of cases for whom information pertaining to the question was available and enter the # of cases detected of those with information. If no information is available, please enter "0" in the right column only.
- 3. The # of cases detected should not exceed the # of cases with info available.

Signs or Symptoms Number of primary cases			
• Add Signs or Symptoms			
Sign or Symptom	# cases	# cases with info	
		available	Enter 0 when this
Vomiting		0	information is not known.
Diarrhea	0	3	0
Bloody stools	2	3	0

Other (specify)

NORS picklists are not exhaustive and include the option to select "Other" and enter free text values in most cases. There are a few ways the "Other" option can appear in NORS, depending on the question type.

Drop-down lists

Select "Other" from the drop-down list. A pop-up will appear with a free text field. Specify the value and click "Save." The specified value will then appear in the original variable field.

Major Setting	
×	
A Backcountry/wilderness area Campground Child davcare/preschool	
Correctional/detention facility Event space	Major Setting ×
Factory/industrial facility Fairground Farm/dairy/agricultural setting Hospital	Please specify Airplane
Hotel/motel Long-term care/nursing home/assisted-living facility	Cancel Save
Office/indoor workplace Organized camp facility Other	
Other healthcare facility Park/outdoor area	Major Setting
Religious facility Residence—Multi-unit housing Residence—Single-family home	Other - Airplane

Multi-select lists

In a pop-up or table with multi-select checkboxes, the "Other" option can be found in a grey box below the list. Clicking the box will open a free text field.

In a pop-up, specify the data value and click "Add." The specified value will then appear as a selected value in the list. If applicable, click "Save" to save and exit the pop-up.

dd Settings	×	Add Settings	
Select items from list or Enter other items		Select items from list or Enter other items	
Q Search		Q Search	
Park/outdoor area		Religious facility	
Religious facility		Residence—Multi-unit housing	
Residence—Multi-unit housing		Residence—Single-family home	
Residence—Single-family home		Restaurant	
Restaurant		School/college/university	
School/college/university		Ship/boat	
Ship/boat		Unknown	
Unknown		✓ Other - Airplane	
0 selected		1 selected	
Other (specify)		Other (specify)	ж
Airplane			
Cancel	Save	Car	ncel Save

In the interface, entering an additional item under "Other" will automatically save it to the list, without the need to click "Save" or "Add."

Long-term Care Outbreaks Complete this section only if "Long-term care/nursing home/assisted living facility," "Long term care facility," or "Assisted Living/rehab" is selected as a setting
 Types of care affected (Select all that apply) Nursing home/skilled nursing Assisted living Independent living (in continuous care community) Intermediate care Memory care
Other Other long term care facility

SECTIONS OF INTEREST

Geographic Location

This section refers to <u>primary cases</u> that resulted from the mode of transmission selected above. Do not include information regarding secondary cases in this section. For more information on definitions and reporting multistate exposure and multistate residency outbreaks, please visit **Appendix B: Reporting Multistate Exposure and Residency Outbreaks**.

Exposure State

 When creating a new report, select the state(s) where exposure occurred. If cases were exposed in one state, please just select one state from the drop-down list of states in the "Exposure State(s)" field. If the outbreak resulted from a common exposure that occurred in multiple states, please select all states that apply. You will be able to edit this information if needed after the report has been created in the interface.

New Report	×	New Report	×	New Report	×
State Report ID locationtest	Î	State Report ID locationtest		State Report ID Iocationtest	Í
Date first case became ill 12/02/2022		Alabama Alaska		Alabama	
Primary Cases		Arizona Arkansas		 Arizona Arkansas 	
Transmission Mode		California Colorado		California Colorado	
Exposure State(s) Select.	וו	Connecticut Delaware Selecc.	J	Connecticut Delaware California X Arkansas X Arizona X	
Cancel Sav	e	Cancel	Save	Cancel Sa	ave

2. Once the report has been created, the Geographic Location section of the report, including states, will be populated. This information can be edited. In this example, since multiple states were selected at report creation, "Exposure occurred in multiple states" has been selected, and the associated state names have been populated below it. Select "Add States" to add additional states or select the "Minus" icon to delete them.

Geographic	Location
States	
 Exposure oc 	curred in single state
Exposure oc	curred in multiple states
 Exposure or some or all state(s) 	curred in a single state b cases resided in different
Specify exposure	states
Add States	
State	Case Count
California	•

3. If the exposure occurred in a single state and some or all cases did **NOT** reside in other states, make sure that "Exposure occurred in a single state," has been checked, and only one exposure state has been selected.

 Exposure occur some or all case state(s) 	red in a single state but es resided in different
Specify exposure stat	e
State	Case Count
California 🗸	
Specify other states w	here cases resided
Add States	
State	Case Count
Colorado	
Oregon	•

- 4. If an exposure occurred in a single state but some or all cases *resided* in different state(s), please check "Exposure occurred in a single state, but some or all cases resided in different (s)." Specify the state where exposure occurred, and specify the other states where cases resided. In the example above, the exposure occurred in California, but cases resided in both Colorado and Oregon.
- 5. If the outbreak exposure occurred in multiple states or cases resided in multiple states, individual case counts can be added for each state involved, if known. Boxes for case counts will automatically populate alongside each selected state name. Please enter the number of case-patients which resided in each state and visit **Appendix B** for more information on how to report case counts.

Exposure County

1. Indicate the name of the county where the exposure occurred under "Specify exposure county."

California	~	
Counties		
Exposure occurred in s	ingle county	
 Exposure occurred in r 	nultiple coun	
 Exposure occurred in a single cour but some or all cases resided in different counties 		
Specify exposure county		
Lake	~	

2. If the exposure occurred in multiple counties in the exposure state, select "Exposure occurred in multiple counties." The dropdown menu under "Specify exposure counties" will populate a list of all counties within the exposure state; select all that apply. To remove a county, click the "X" next to the county name. In the screenshot to the right, the exposure occurred in both Lake and Kings counties.

California	~
Counties	
○ Exposure occurred in sing	gle county
Exposure occurred in mu	ltiple counties
 Exposure occurred in a si but some or all cases resi different counties 	ngle county ded in
Specify exposure counties	
Lake 💥 Kings 🛞	

3. If an exposure occurred in a single county but some or all cases resided in multiple counties, select "Exposure occurred in one county, but some or all cases resided in different counties." Select the county where exposure occurred under "Specify exposure county," and select the other counties involved in the outbreak under "Specify other counties where cases resided." In this screenshot, residents of Alameda and Kings counties were exposed in Lake County.

Specify exposure state California	
Counties	
○ Exposure occurred in single county	
 Exposure occurred in multiple count 	ies
 Exposure occurred in a single county but some or all cases resided in different counties 	ŕ
Specify exposure county	
Lake 🗸	
Specify other counties where cases resided	
Alameda 💥 Kings 🕊	

Etiology and Isolates

Etiology

1. To add etiology/isolate information on a confirmed or suspected outbreak etiology, select "Yes." If there is no confirmed or suspected etiology, select "No (unknown etiology)."

Etiolog	/ and Isolates	
Is there at	ast one confirmed or suspected outbreak etiology(s)? 🕢	
Yes		
○ No (un	iown etiology)	

2. To add information on a confirmed or suspected outbreak etiology, click "Add Etiology." A pop-up box will appear.

3. In the "Genus" field, select the genus name for the first suspected or confirmed etiology; chemicals/toxins are also listed in this

Etiology and Isolates
Is there at least one confirmed or suspected outbreak etiology(s)? 🕢
● Yes ○ No (unknown etiology)
Etiology
Add Etiology
Etiology
No data provided

category. If the correct genus is not listed in the drop-down, select "Other Bacterium," "Other Virus," "Other Parasite," or "Other Chemical/Toxin" as appropriate and then specify the etiology in the "Other characteristics" field.

4. In the "Species" field, select the appropriate species name for the suspected or confirmed etiology. If more than one species of a single genus is involved in an outbreak (e.g., both *Campylobacter jejuni* and *Campylobacter coli*), enter each one as a separate etiology.

5. In the "Subtype" field, select the serotype or genotype for each suspected and confirmed etiology, if known. If more than one serotype or genotype of a single species is involved in an outbreak, enter each one as a separate etiology. Provide serotypes for all STEC and Salmonella enterica outbreaks.

PLEASE NOTE:

Etiology data from confirmed norovirus outbreaks may be imported to the Etiology table from CaliciNet. For information regarding the CaliciNet Integration,

Add etiology using:		
Manual Entry	~	
Wandar Entry		
Genus	Species	Subtype
Campylobacter	· ✓ jejuni	· · · · · · · · · · · · · · · · · · ·
Other characteristics		
Total # positive primary cases	# CIDT-positive only	# Culture-confirmed
5	1	4
Confirmed or Suspected		
Confirmed	~	
Detected In:		
✓ 1 - patient specimen		
2 - food sample		
3 - environmental sample		
5 - water sample		
6 - animal specimen		

please refer to the CaliciNet Integration training document on the NORS website at

<u>https://www.cdc.gov/nors/training/general.html</u>. If you are entering norovirus as an etiology and there is no matching CaliciNet record, you may manually enter etiology data. The "Subtype" field will be replaced with "Polymerase" and "Capsid" fields to accommodate dual typing data. If no information on either the polymerase or capsid is available, please enter "unknown" in the "Capsid" field.

6. In the "Other Characteristics" field, list any other pertinent characteristics of the outbreak etiology, such as virulence factors, metabolic profile, and additional serotype, or genotype information that may not be captured elsewhere.

7. Indicate the total number of laboratory-confirmed primary cases, including CIDT-positive only and culture-confirmed cases, associated with each etiology reported.

8. Specify whether the etiology listed is a laboratory-confirmed etiology or a suspected etiology for the outbreak. Etiology confirmation guidelines for foodborne outbreaks are located at: http://www.cdc.gov/foodsafety/outbreaks/investigating-outbreaks/confirming_diagnosis.html.

9. In the "Detected In" field, select all samples in which the etiology was detected:

- Patient specimen
- Food sample
- Environmental sample
- Food worker specimen
- Water sample
- Animal specimen

10. To edit an etiology, click the corresponding highlighted etiology name to reopen the pop-up window. To delete the etiology, move the cursor onto the corresponding row in the table and click the "Minus" icon that appears there, as in the screenshot below.

Etiology			
Add Etiology		Todal	
Etiology		l o del c	ete the etiology, lick below.
Campylobacter jejuni To edit the etiology, click the etiology name.	Positive primary cases: 5 Culture-confirmed: 4 CIDT-positive only: 1	Confirmed Detected In: patient specimen	0

Isolates

If there is no confirmed or suspected etiology, skip this section. If the etiology is confirmed or suspected, enter isolate/sequence information from PulseNet and CaliciNet, if available. NARMS data will automatically be imported if linked to isolates with information available. Isolate data from CaliciNet and PulseNet may be imported into NORS from those systems directly. For information regarding CaliciNet and PulseNet integration, please refer to the **NORS User Training Document: Integrated CDC Lab Systems**.

For information related to PulseNet, visit: <u>http://www.cdc.gov/pulsenet/</u>. For information related to CaliciNet, visit: <u>http://www.cdc.gov/norovirus/reporting/calicinet/</u>. For information related to the National Antimicrobial Resistance Monitoring System, visit: <u>https://www.cdc.gov/narms/</u>.

Fungal Diseases

Users can report fungal outbreaks caused by Blastomyces, Coccidioides, Histoplasma, or Sporothrix in NORS.

1. To report outbreaks of fungal etiologies, select "Environmental contamination other than food/water" as the transmission mode while creating the report.

New Report	×
State Report ID	
Date first case became ill	
mm/dd/yyyy	
Primary Cases	
Transmission Mode	
~	
Food	
Water Animal contact	
Person-to-person	
Environmental contamination other than food/water Indeterminate/unknown	
Current Current Current	e .

2. Add Blastomyces, Coccidioides, Histoplasma, or Sporothrix within the Etiology section.

dd Etiology			
Add etiology using:			
Manual Entry	~		
Genus	Species	Subtype	

3. Complete fungal specific questions within the "Fungal Disease Outbreaks" section. This section will only appear when the mode of transmission is "Environmental contamination other than food/water."

At a Glance				
្វិ Outbreak	Fungal Disease Outbreaks			
Geographic Location	outbreaks			
Primary Cases				
Secondary Cases	Treatments			
1 Laboratory & Environmental	Treatment	# cases	# cases with info	
Etiology and Isolates			available	
Settings	Treated with systemic antibacterial			
Fungal Disease Outbreaks	medication before fungal infection was			
Detection & Investigation	diagnosed (e.g., ora, IV)			
Interventions	Treated with systemic antifungal			
Remarks	medication (e.g., oral, IV)			

Settings

This section provides a brief overview of the Settings section. The fields displayed in this section depend on the mode of transmission and the settings selected. For information on water settings, see the Water section below.

Setting(s) of Exposure

For environmental contamination, person-to-person, and unknown/indeterminate outbreaks, first select a single major setting from the dropdown list. If the setting of exposure does not fit into any listed categories, select "Other" and type in the name of the setting in the pop-up and click "Save." This is the setting where the first known cluster of illnesses in the outbreak was exposed. Then select all additional settings where primary cases were exposed.

Setting(s) of Exposure	
Major Setting	
Hospital	*
II other settings where exposures occurred	
Long-term care/pursing home/assisted-living faci	lity 🛪
Long term care/narsing nonic/assisted living fact	
Other healthcare facility *	
Other healthcare facility ×	_

In the example to the left, a person-to-person outbreak occurred in a group of healthcare facilities with overlapping staff and frequent patient transfers. Hospital was selected as the major setting, and additional facility types were included as other settings. The "Setting of exposure remarks" field was used to provide additional information about the settings.

For food and animal contact outbreaks, select all settings where food was eaten or where animal contact exposures occurred. Provide additional details in the "Setting of exposure remarks" text box.

Setting(s) of Preparation

For food outbreaks, select all settings where food was prepared in the pop-up. Provide additional details in the "Setting of preparation remarks" text box.

Associated Events

If exposure was associated with a special event, select "Yes." A new field will open to specify the type of event. Clicking this field will open a pop-up with the NORS event values. Select the appropriate checkboxes and click "Save." Selected events will then be displayed in the specify field. To remove an event type, click the grey "X" next to the event name, and select "Delete" in the pop-up to confirm.

If the radio dial for the question, "Was exposure associated with a specific event(s) or gathering(s)?" is changed to "No" or "Unknown" after an event type has already been entered, the type of associated event will be cleared from the report.

Setting-specific questions

NORS collects additional information on long-term care, school, and correctional or detention facility outbreaks. These sections will only be available when the corresponding setting is selected.

Attack Rates

For environmental contamination, person-to-person, and unknown/indeterminate outbreaks that occurred in a single setting, enter the estimated number of persons exposed and ill by group type (residents/guests and staff). The crude attack rate will be calculated automatically and displayed in the column on the right side of the table. If the groups provided do not apply or data using this distinction is unavailable, enter the total number exposed and ill in the top line for residents/guests.

Attack Rates Complete for outbreaks that occurred in a single setting only					
Group	Estimated # exposed 🕢	Estimated # ill	Crude attack rate [(estimated # ill / estimated # exposed) x 100]		
Residents, guests, attendees, patients, etc.	26	8	30.77 %		
Staff, crew, etc.	6	3	50.00 %		

Food

This section provides a brief overview of how to complete the Food section and answer food-related questions in NORS. This will include answering Food Vehicle, Ingredient, and Contributing Factors related questions of a NORS foodborne disease outbreak report.

Food Vehicle

REPORT	AGENCY CDC	status Active	REPORT SEARCH CDC or State ID	If the food is unknown, check
At a Glance		Food Section		the box "Food vehicle not
Geographic Location		Food Vehicle		determined."
Secondary Cases		 Food vehicle determined Food vehicle not determined 		NOTE: Do not
Laboratory & Environmenta Etiology and Isolates Settings	al	What were the reasons supporting f	oodborne? (Select all that apply)	the food
 Food Traceback & Recall 		Laboratory evidence Environmental evidence		vehicle is known or if
Detection & Investigation Interventions		Other V		there are
🗅 Remarks		Does the location of preparation have	e a certified food protection manager?	suspected food
			~	items.

If the food vehicle is not determined, enter the reason(s) why the outbreak was considered foodborne, with an undetermined vehicle.

If a food vehicle was identified, enter all information about the food vehicle by clicking on "Add Food Vehicle."

REPORT	AGENCY CDC	status Active	REPORT SEARCH CDC or State ID	-
At a GlanceOutbreak		Food Section		
Geographic Location		Food Vehicle		
Primary Cases		Eood vehicle determined		
Secondary Cases		O Food vehicle not determined		
🗅 Laboratory & Environmen	tal			
Etiology and Isolates		Add Food Vehicle		
Settings				
🗅 Food		Does the location of preparation have	e a certified food protection manager?	
Traceback & Recall			~	
Detection & Investigation		Was an infectious food worker implic	ated as the source of contamination?	
Interventions			č	
🗅 Remarks				

Name of Food

The first box asks for "Name of Food." You can enter the name of the food by selecting from the list provided. If the name of the food is not on the list, you can add it as a new food. However, before you add a new food, double-check the picklist as it is exhaustive. After selecting the food vehicle, answer the

following questions. Choose whether the food vehicle was confirmed or suspected. Then, indicate the reason the reason(s) the implicated food was confirmed or suspected. Multiple selections for the reason(s) the implicated food was confirmed or suspected are permitted. To add another Food Vehicle, click "Add Food Vehicle" and follow the previous steps.

Ad	d Food Vehicle	×
	Name of food	
	ар	
	apple juice, unpasteurized	
	apple juice, unspecified	Save
	apricot, unspecified	
	cobbler, apple	
	Crabapple cider, unpasturized	
0 /	fish, kapchunka (white fish)	
	lapas/limpet, unspecified	
Does	paprika, unspecified	d protection mar
	Pineapple Cider, pasturized	
Wasa	pineapple juice, pasteurized	rce of contamina

Ingredients/Contaminated Ingredients

For each food vehicle added, select the ingredient(s) of the food item. For example, if the implicated food was seafood pasta, the ingredients might be mussels, scallops, shrimp, and pasta. After each ingredient is added, select if the ingredient is a contaminated ingredient.

Answer the following questions	REPORT	AGENCY CDC	status Active	REPORT SEARCH CDC or State ID	
under each food	At a Glance		Ingredient(s) Enter all		
vehicle added.	🗅 Outbreak		Add Ingredient(s)		
Select the method	Geographic Location		Ingredient	Contaminated	
of processing, the	Primary Cases		apple		•
lovel of proparation	Secondary Cases				
level of preparation,	Laboratory & Environment	ntal	glaze, brown sugar		0
the method of	Etiology and Isolates				
preparation &	Settings		Mathad of processing		
	🗅 Food		Method of processing		
service, the type of	🗅 Traceback & Recall		Select		
packaging, if the	Detection & Investigation	n	I wal of according		
contaminated food	Interventions		Ready to eat (RTF) food		
was imported to the	Remarks		Raw, intended for raw service (no	o kill step performed)	

US, if the product was produced under US domestic regulatory oversight, and if the product was sold under US domestic regulatory oversight. After answering questions specific to a food vehicle, select if the location of preparation had a certified food protection manager and if there was an infectious food worker implicated as the source of contamination.

Contributing Factors

Consult **Appendix D of the NORS Guidance Document** for more detailed definitions, explanations, and examples of each contributing factor.

After consideration of all epidemiological, laboratory, and environmental assessment information available, if the contributing factors for this outbreak could not be determined, check the "Contributing Factors are unknown" box at the top of the section. If this box is checked, the remainder of the contributing factors section will be hidden and then select the reason no contamination source is available to enter.

REPORT	AGENCY STATUS		REPORT SEARCH	
-	CDC	Active 🥒	CDC or State ID	
🖨 At a Glance		Contamination Factors:	to enter	
🗅 Outbreak			to enter	
🗅 Geographic Location		Add Contamination Factors		
Primary Cases		Eactor Nama	Source(c) O	
Secondary Cases	antal	C2 - Poisonous substance or infectious	 Point of Final Prep/Sale 	•
	entai	agent intentionally added to food to cause illness	Before POS Pre-Harvest	
Etiology and Isolates			Before POS Post-Harvest	
Settings			 Before POS Unknown Pre or Post Harvest 	
🗅 Food			Unknown location	
🗋 Traceback & Recall				
Detection & Investigation	on	Proliferation Factors: Bacterial and fun	ngal outbreaks only	
			<u>igur outeroute onn</u> j.	
🗅 Remarks			enter	
		• Add Proliferation Factors		
		Factor Name	Source(s) 💿	
		P3 - Inadequate cold holding temperature due to malfunctioning	Point of Final Prep/SaleBefore POS Pre-Harvest	0

If contributing factors are known, then select all factors that are causally associated with the outbreak. Multiple selections are permitted. Contributing factors are classified into three categories: Contamination, Proliferation, and Survival Factors. Indicate the source of contamination for each food contributing factor by selecting "Point of final prep/sale," "Before POS Pre-Harvest," "Before POS Post-Harvest," "Before POS Unknown Pre or Post Harvest," or "Unknown location."

Animal

This section provides a brief overview of how to complete the Animal Contact section and answer animal-related questions in NORS. This will include answering Animal Vehicle questions of a NORS animal contact outbreak report. Please refer to the Animal Contact section of the NORS Guidance Document for additional definitions and further instructions.

Animal Vehicle

If the animal vehicle is unknown, check "Animal vehicle not determined." **Note: do not check this box if the animal vehicle is known or if there are multiple suspected animal vehicles.** If the animal vehicle is undetermined, enter the reason(s) why the outbreak was considered animal contact with an undetermined vehicle.

Animal Contact
Animal Vehicle
 Animal vehicle determined Animal vehicle not determined
If animal vehicle undetermined, reason(s) supporting animal contact (Select all that apply)
 Laboratory evidence
Environmental evidence
Traceback investigation
Other 🗸

If an animal vehicle was identified, select "Animal vehicle determined" and enter all information about the animal vehicle by clicking on "Add Animal Vehicle." A pop-up window will prompt you to enter the first animal type. If there were multiple animals involved in the outbreak, please enter each animal separately. You can enter the animal type by selecting from the automated suggestions provided, or you can add a new animal type if it is not already on the list. Click "Save" after you have finished entering the first animal type.

Animal Contact	Add Animal Vehicle	×
Animal Vehicle	Animal type	
 Animal vehicle determined Animal vehicle not determined 	doj Dog or puppy	
• Add Animal Vehicle	Dolphin Donkey or mule terminec	Save

A Dog or puppy
Animai type
Dog or puppy
Vehicle confirmed or suspected
~
Reason(s) confirmed or suspected
Select
Animal(s) experienced diarrhea or illness that could be related to outbreak illnesses?
Animal(s) imported to US?
~
Did the animal(s) implicated in the outbreak meet any of the following criteria?
Backyard/residential livestock or poultry
Commercial livestock or poultry
Pet/companion animal
Interactive exhibit animal
Wild animal/wild game
🗆 Unknown
Other 🗸

Answer the following questions specific to animal type. Indicate whether the animal vehicle was confirmed or suspected and select the reason(s) why the animal vehicle was confirmed or selected (multiple selections are permitted). Indicate whether the animal experienced diarrhea or illness that could be related to outbreak illness, if the animal was imported to the US, or if the animal implicated in the outbreak met any of the following criteria (select all that apply).

To add another animal vehicle, click "Add Animal Vehicle" and follow the previous steps. To edit an animal vehicle, click the down arrow to the left of the animal vehicle you wish to edit. To delete an animal vehicle, click the trash icon at the right end of the row.



Water

This section provides a brief overview of how to complete the Water section and water-related questions in NORS. This will include answering Sampling Location and Results, Settings, Supporting evidence, Legionella & Other Biofilm-Associated Pathogens, Water Quality Management, and Contributing Factors related questions of a NORS waterborne disease outbreak report.

Laboratory & Environment – Environmental Investigation

If water samples were tested, add the Sampling Location(s) of the water that was tested. If you do not find the location you need on the list, select "Other," enter the location manually, and select "Add." The location will then appear checked on the list, and you can click "Save."

	Add Sampling Loc	ation(s)	×		
	Select items from lis	t or Enter other items			
	Q Search				
	Cooling Tower				
	Distribution Syst	em – Water Utility			
	Faucet/Tap				
	Hot Tub/Spa/W	hirlpool			
	Lake/Reservoir				
	Pool				
	Shower				
	Sink				
	Other *				
		Cancel	ave		
		Sink			
		Unknown			- 1
		Other - Example			- 1
		1 selected			
		Other 🖌			
		o there is a second sec			
	×				
le	Add		Ca	ncel Sav	'e

Indicate if environmental sampling results implicated water as the primary mode of transmission. If yes, indicate if the results implicated the vehicle(s) of transmission.

Di	d enviror	nmental sampling results implicate wa	ter as the primary mode of transmission?
	Yes	~	
	Did the r	esults implicate the vehicle(s) of trans	mission?

The following table will only appear if you selected "Yes" to whether environmental sampling results implicated water as the primary mode of transmission. Enter a brief description for each environmental sampling result that implicated water after selecting "Yes" or "No" for supporting results. The description is a free text field; please enter specific details, if possible (e.g., water sample from Lake Lanier was taken on 01/01/2023 at 10:00AM and pH was 7.8). If you have an environmental sampling result to add that is not listed, click "Add other sampling result," type in the result, and click "Add." The result will then appear on the list, and you can enter a description.

vironmental sampling sults	Are there supporting environmental sampling results?	Please describe relevant environmental sampling results (e.g., fecal indicators identified in well water on [insert date].)
Fecal indicators	○ Yes	
	○ No	ĥ
рН	○ Yes	
	○ No	li li
Temperature	○ Yes	
	○ No	ĥ
Turbidity	○ Yes	
	○ No	li l
Residual/free disinfectant	○ Yes	
level	○ No	
Combined disinfectant	○ Yes	
level	○ No	
Etiologic agent(s)	○ Yes	
	○ No	

If historical or other environmental health evidence implicated water as the primary mode of transmission, select "Yes" and enter a description into the free text field. If no other evidence implicated water as the primary mode of transmission, select "No" and the description text box will not appear. Lastly, select "Yes" or "No" if you would like to attach environmental sampling results to the report. If "Yes," follow the guidelines in the "Attachments" section of this document to upload the results.

Did historical or other envir	nmental health evidence implicate water as the primary mode of transmission?
Yes	~
Please describe:	
Would you like to attach en	ironmental sampling results to this report?
• Yes	
O No	

Settings

Select all "Implicated type(s) of water exposure" that apply to the outbreak. This is not limited to one type of water exposure. Click on the check box(es) next to the type of water exposure(s) that was involved in the outbreak. The options in this section are "Treated recreational water," "Untreated recreational water," "Drinking water in public or individual water systems," "Other exposures to water, including other environmental exposures to water," and "Undetermined exposures to water".

Se	ettings
Set	tting(s) of Exposure and Implicated Vehicle Description: Water
Im	<u>plicated type(s) of water exposure</u>
	Treated recreational water (e.g., in manufactured venues such as pools, spas/whirlpools, hot tubs, spray pads, at-home kiddie pools)
~	Untreated recreational water (e.g., natural venues such as freshwater lakes, hot springs, marine beaches/oceans)
	Drinking water in public or individual water systems (e.g., municipal system, private well, commercially-bottled water, water kiosk), regardless of the exposure pathway (i.e., not limited to ingestion)
	Other exposures to water, including other environmental exposures to water (e.g., cooling/industrial, water reuse, irrigation, occupational, decorative/ display; includes water consumed from sources such as back-country streams)
	Undetermined exposures to water (i.e., the intended purpose or use of the water is unknown or the water exposure category could not be determined)

Add Water venue information including the venue type, subtype, and setting of exposure for each type of water exposure and click "Save." If multiple venues were implicated, add subsequent venues by clicking on the "Add Venue" link and repeating the process.

Add Water Venue	×
Water exposure type	
Treated recreational water	
Water venue	
~	
Water venue subtype	
~	
Setting of exposure	
~	
How was the water in the venue treated?	
~	
Treatment Description	
Select	
Other (specify) 😪	
What were chlorine stabilizer levels at the time of the outbreak?	
Cancel Sav	e

Water

In the supporting evidence section, indicate the "Estimated total number of persons with primary water exposure," regardless of whether they became ill or not. If known, enter the actual number of persons with the primary exposure instead. Then select which evidence implicated the water exposure(s). Options for this include "Epidemiologic data," "Clinical laboratory data," "Environmental health data," and "Prior experience makes this a likely source." Select all that apply. Finally, select whether data were collected to estimate association.

Supporting evidence	
Estimated total number of persons with primary water expo	sure:
What evidence implicated the water exposure(s)? Select all that	t apply
Select	
Were data collected to estimate association (e.g., odds ratio)?
~	

If "No," or "Unknown" is selected for data collected to estimate association, indicate if water was the common source shared by persons who were ill.

Were data collected to estimate association (e.g., odds ratio)?		
No	~	
Was water the common source	shared by persons who were ill?	

If "Yes" is selected for data collected to estimate association, please provide the epidemiologic data that implicates the water exposure by clicking "Add Epidemiologic Data."

Were data collected to estimate a	association (e.g., odds	ratio)?	
Yes	~		
Please provide the epidemiologi Add Epidemiologic Data	c data that implicates	the water exposure:	
Exposure description	Attack rate	Effect measure	
	No data provided		

You can report the following information: "Exposure description," "Attack rate," "Effect measure," "Type of effect measure," "p-Value," and "95% confidence interval." Click "Save" when you have entered the available information.

Add Epidemiologic Data	×
Exposure description	A
Attack rate	
Effect measure	
Type of effect measure	
p-Value	
95% confidence interval	
Ca	ancel Save

Legionella and Other Biofilm-Associated Pathogens

Only complete this section if the waterborne outbreak was associated with *Legionella* or other biofilmassociated pathogens.

Indicate if the outbreak occurred in a facility with any of the following characteristics. Select all that apply and type a characteristic in "Other" if you do not find it on the list.

If the facility had a water management program in place before the outbreak, indicate which elements the program included, and who designed the water management program. Select all that apply for both.

Legionella and Other Biofilm-Associated Pathogens
Did the outbreak occur in a facility with any of the following characteristics? <i>Select all that apply</i>
□ "Green" components (e.g. low-flow engineering)
 Construction in building within the last six months
Construction nearby within the last six months
Associated cooling towers
 Other associated aerosolizing devices (e.g., hot tub, decorative fountains, misters)
Supplemental building disinfection system
Centralized hot water system
Unknown

□ None

Other

Did the facility have a water management program in place before the outbreak?
Yes 🗸
Which of these elements did the program include: Select all that apply
\$elect
Multi-disciplinary water management program team
Diagram of the building's water system
Identification of control points/locations (e.g., areas of potential Legionella growth and spread)
Established control limits
Regular water parameter testing (e.g., disinfectant, temperature, pH)
Plan for implementing corrective action (tasks taken when monitoring values are outside of control limits)
Method of plan verification (e.g., pathogen testing, clinical surveillance)
Documentation of water management program performance and activities
Unknown
None

If recommendations were provided to the facility, select all that apply. Finally, indicate if samples were tested for *Legionella* at a laboratory participating in a national proficiency program. If you do not find a recommendation on the provided list, enter it manually in the "Other" box.

Were recommendations provided to the facility to decrease the risk of <i>Legionella</i> or other biofilm-associated pathogen exposure?
Yes 🗸
please select all that apply:
Flushing potable water system
Superheat potable water system
Implement secondary potable water disinfection system
 Implement point of use filter(s)
Low level chlorination of potable water system
Water restrictions (e.g., discontinuing use of showers, faucets, or other water uses)
Closure of an associated device (e.g., shutdown of a fountain, hot tub)
 Hyperchlorination of potable water system
 Hyperchlorination of recreational water system
Other
Were samples tested for Legionella at a laboratory participating in a national proficiency program (e.g., ELITE, ELAP, AIHA)
~

Water Quality Management and Contributing Factors

The next section will vary depending on which implicated type(s) of water exposure was selected in the Settings section. Regardless of water type, indicate if contributing factors are unknown, otherwise, click "Add [Water type] Water Factors" and select which factors were found during the investigation and whether they were "Documented/observed or Suspected." If you need to add a contributing factor to the list, select "Other," type in the contributing factor, click "Add," and then click "Save." Each "remarks" field contains a single text field for any additional comments about the waterborne disease outbreak investigation.

In this example, treated recreational water was the implicated water exposure. Indicate if the water venue(s) was inspected in the 6 months before the outbreak. If yes, please attach the results to the report.

Recreational Water — Treated Venue		
<u>Water quality management</u>		
Was water venue(s) inspected in the 6 month	s before the outbreak?	
	•	
	[NOTE: If yes, please attach results]	
Treated recreational water remarks		
Factors contributing to recreational wate	er contamination or increased exposur	e in treated venues
Contributing factors are unknown		
• Add Recreational Water Factors		
Factor (Only select what was found during investigation)	Documented/observed or Suspected	
No items s	elected	

In this example, untreated recreational water was the implicated water exposure. Indicate if the venue met recreational water quality standards at the time of the outbreak and if you have microbiological water quality testing results collected in the 3 months before the outbreak. If yes, please attach the results to the report.

Recreational Water — Untreated Ven	ue	
<u>Water quality management</u>		
Did the venue meet recreational water quali criteria) at the time of the outbreak?	ty standards (e.g., applicable local, state, or f	Environmental Protection Agency [EPA]
	*	
Do you have microbiological water quality t	esting results collected in the 3 months befo	re the outbreak?
	[NOTE: If yes, please attach results]	
Untreated recreational water remarks		
		B
Factors contributing to recreational wa	<u>ter contamination and/or increased exp</u>	oosure in untreated venues
□ Contributing factors are unknown		
Add Untreated Water Factors		
Factor (Only select what was found during investigation)	Documented/observed or Suspected 📀	
No items	selected	

In this example, drinking water was the implicated water exposure. Indicate if the drinking water system(s) had any monitoring violations or maximum contaminant level (MCL) violations in the 1 month before the outbreak and if the drinking water system(s) had any violations in the 12 months before the outbreak. If you answered "Yes" to any of these, please provide an explanation in the free text field.

Drinking Water Systems		
Water quality managment		
Did the drinking water system(s) h	ave any monitoring violations in the 1 month before the outbreak?	
Yes	~	
if yes , explain:		
		//
Did the drinking water system(s) h	ave any maximum contaminant level (MCL) violations in the 1 month before the outbreak?	
	·	
Did the drinking water system(s) h	ave any violations in the 12 months before the outbreak? 💿	
	~	
Drinking water remarks		
		/i

There are additional questions in the drinking water section related to the location in system contributing to contamination. Indicate if there was a problem with the quality of the source water, if water quality was affected by a problem occurring with the water treatment or within the distribution system before entry into a building or house, and if the water quality was affected by a problem occurring after the water meter or outside the jurisdiction of a water utility.

Location in system contributing to drinking.	water contamination	
Was there a problem with the quality of the source	e water?	
~		
Was water quality affected by a problem occurring	g with the water treatment or within the	distribution system before entry into a building or house?
Was water quality affected by a problem occurring	g after the water meter or outside the ju	risdiction of a water utility?
Drinking water contributing factors		
Contributing factors are unknown		
• Add Drinking Water Factors		
Factor Doc (Only select what was found during investigation)	cumented/observed or Suspected 📀	
No items selec	cted	

In this example, the implicated water exposure was classified as other, including other environmental exposures to water. Indicate how the exposure(s) to the water system/source occurred by selecting an option from the drop-down menu. If an exposure is not listed, select "Other," specify in the free text field, and click "Save."

Other Exposures to Water, Including Other Environmental Exposures to Water
Implicated water - water exposure description
How did the exposure(s) to the water system/source occur?
✓
 Water was used directly from a freshwater source (e.g., lake/river/stream/roadside spring) for drinking water, sanitation, or hygien Water was piped from a nonpotable freshwater source (e.g., irrigation ditch) for drinking water, sanitation, or hygiene Water was used in a heating/cooling unit (e.g., cooling tower, air conditioner) Water was used after the tap in a personal care or medical device (e.g., CPAP machine, neti-pot) Water was used in an ornamental system/device Water was used for factory processes/industrial purposes Water was used as part of occupational activities Rain water was collected/used for nonpotable purposes Other
Oulei
Other exposures to water remarks

Factors contributing to contamination and/or increased exposure to contaminated water	
Contributing factors are unknown	

• Add Other Water Factors

Factor (Only select what was found during investigation)	Documented/observed or Suspected 💿
No items	selected

In this example, the implicated water exposure was undetermined. Indicate which water exposure(s) were suspected in the outbreak by selecting all that apply.

Undetermined Exposures to Water
Implicated water - water description
 Which water exposure(s) were suspected in the outbreak? (select all that apply) Treated recreational water Untreated recreational water Drinking water in public or individual water systems Other exposures to water including environmental exposure to water
 Specific water exposure(s) could not be identified Undetermined exposure to water remarks

If any contributing factors were documented or suspected for undetermined exposures to water, please describe the contributing factors in the free text box, as shown below.

Factors contributing to co contaminated water	ntamination and/or increased exposure to
Were any contributing factors	documented or suspected in this outbreak investigation? 📀
Yes	~
Please describe the contributir	g factors below:
	ĥ

Interventions

This section is applicable to all modes of transmission and refers to interventions that were recommended or implemented during the outbreak.

REPORT	AGENCY	STATUS REPORT SEARCH Active CDC or Stat
 At a Gla Outbread Geograp Primary Seconda Laborato Etiology Settings 	nce k hic Location Cases ry Cases ory & Environmental and Isolates	Interventions Were any interventions recommended or implemented to help stop the outbreak? O Yes O No O Unknown
 Water Detectio Interven Remarks 	n & Investigation tions	Were any public communications released for this outbreak? (e.g., press release or outbreak notice) O Yes O No O Unknown Remarks about interventions

Indicate if any interventions were recommended or implemented to help stop the outbreak. If you select "No," explain why in the free text field.

If you select "Yes," indicate which type(s) of interventions were recommended or implemented.

Interventions

Were any interventions recommended or implemented to help stop the outbreak?

- Yes
- No
- Unknown

Explain why none were recommended or implemented.

Interventions are grouped by "Facility/site/venue and equipment," "People," "Animals," "Food," "Water," and "Other." These groupings are designed to organize the interventions and do not reflect what mode of transmission these interventions correspond to. Any intervention can be selected for any mode of transmission. Click on the drop-down arrow to see the intervention types in each category.

Interventions

Were any interventions recommended or implemented to help stop the outbreak? Yes ○ No ○ Unknown What type(s) of interventions were recommended or implemented to help stop the outbreak? Interventions - Recommended and Implemented \sim Facility/site/venue and equipment \sim People Animals \checkmark Food Water \sim Other ~



In this example, water is the mode of transmission (for context) and "Facility / site/ venue closed (for at least 1 day)" is the Intervention Type. Select whether the intervention(s) was "Recommended and implemented," "Recommended, not implemented, not implemented, ont implemented, or "Implemented, not recommended." For waterborne, person-to-person, and environmental outbreaks, "Any point of intervention" will be the only intervention point available. In the following example, food is the mode of transmission (for context) and "Menu modified" is the Intervention Type. Select whether the intervention was "Recommended and implemented," "Recommended, not implemented," "Recommended, unknown if implemented," or "Implemented, not recommended" for the point of exposure and other points of intervention (distribution, processing, and source). For foodborne, animal contact, and indeterminate/unknown outbreaks, point of exposure, distribution, processing, and source will have drop-down options for interventions that were recommended and/or implemented.

Interv	entions – Recommende	d and Implemented	
~	Facility/site/venue and equ	uipment	
~	People		
~	Animals		
~	Food		
	Intervention Type	Point of exposure	Other points of intervention
N	lenu modified	Point of exposure Recommended and implemented Recommended, not implemented Recommended, unknown if implemented Implemented, not recommended	Point of distribution Point of processing Source
			~

Indicate if any public communications were released for the outbreak. If "Yes," click the box next to each group(s) that released the public communication. Select all that apply. Include any remarks about interventions in the free text field at the end of the Interventions section.



REPORT FINALIZATION

When you are ready to finalize your report, you will need to change the status from "Active" to "Finalize." At the top of the report, click the pencil next to "Active" under Status and click "Finalize."



If you are ready to finalize the report but still have outstanding issues, you will be required to resolve the issues or provide a comment explaining why the report is being finalized with incomplete items.

Fin	alize this Report	×
	A There are 25 entry issues still outstanding	
a	 Geographic Location Exposure county is required. Primary Cases Number of lab confirmed primary cases has not been provided. Sex information has not been provided. Age information has not been provided. Show all Please resolve the items, or provide a comment to explain why this report is being finalized with incomplete entry items. 	
	Comment is required	
	Cancel Next	

After resolving the issues or providing a comment to explain any incomplete items, click "Next." You may have to verify required information and can then click "Finalize."

Finalize this Report	×
• There are 2 items requiring verification	
Please check the number of lab confirmed cases. If less than one, p change the etiology to "Suspected" or provide an explanation. Explain	lease
Please attach documents to the report or verify that there are no attachments.	
This report will no longer be editable after finalizing.	
Cancel Previous	Finalize

Once the status is changed to "Finalized," you will not be able to edit the report. If further information needs to be added, you can click the pencil next to "Finalized" under Status at the top. Click "Reopen" and provide a comment for why the report is being reopened. Then click "Reopen" again. The status will be changed back to "Active," and you will be able to make edits to the report. Change the status back to "Finalized" when you are finished making edits.

	Reopen this Report	×
STATUS Finalized	Reopen this report and make it editable. Please provide a comment for why this report is being reopened. More information to add.	<i>t</i> e
Leopen	Cancel Reor	en

SIDE PANEL

Users can update report information, add comments, review report history and upload attachments on the right-hand panel within the NORS interface.

- 1. **UPDATE REPORT INFORMATION**: The report owner can change State ID, report owner, or the agency name (within State) for a report using the "Change" option in the side panel.
 - a. Select "Change" on the top right-hand panel under the Report section to change report information.

Report	
State Report ID: Reporting Year:	Test_1234 2023
Agency: Owner:	CDC
Change	

b. Update the required field and click "Save." Changes will be updated in the Report section.
 NOTE: A user cannot update State ID if they are not original owners of the report (i.e., if the report has not been entered by them).

ecord		×
State Report ID Test_123		
Reporting Year		
2023		~
Owner		
		•
Agency		
CDC (CDC)		•
	Cancel	Save

1. ADD COMMENT: To add a comment for a report, select "New Comment" under the Comments section on the right-hand panel of the report. Add a comment in the comment box provided and click "Save." Comments can be accessible to all users within a jurisdiction and can be edited or deleted after being saved by clicking on the pencil or trash icons next to the comment.

Comments (0)	^
New Comment Add comment here.	
Cancer	Save
Attachments (0)	~
Report History	~

2. REPORT HISTORY: All users within a jurisdiction can review changes made to a report by viewing the "Report History" section.

Comments (0)	~
Attachments (0)	~
Report History	^
Report History	Yesterday

3. ATTACHMENTS

Attachments can be uploaded to a report in the "Attachments" section on the right-hand panel.

a. Click the drop-down icon to attach a file to a report.

Comments (0)	
Attachments (0)	
Drop file here, or click to browse (10 MB max)	
Report History	

b. Drop the file directly into the box or browse and select a file to be uploaded. The maximum file size acceptable is 10 MB.

> NORS	✓ <mark>ひ</mark> ♀ Search	NORS	×	 Primary Cases Sex - Sex information has not been provided. Age Num - Total number of cases by Age group does not equal number of estimated tota primary cases. Sign Symptom - Values must be provided for each sign and symptom field. 	1
▲ Name	^	Status	Date mo	Show more	
		0	12/24/20	Comments (0)	Ť
v <			>	Attachments (1) Drop file here, or click to browse (10 MB max)	
NORS	Custom File	is Cano		NORS.docx 🖉 🛍	

c. Users can edit the file name or delete the file using the icons next to the attached file.



SHARING REPORTS

Multistate outbreak reports should be shared with all jurisdictions that have cases in their state or where exposure occurred using the NORS "Set sharing rules" feature. To give report access to all agencies in other states involved in the outbreak:

 Select "Set sharing rules" by clicking the three dots on the top right corner of the report or in the report panel on the right side.

	Create PDF Report	Sharing 🛔 0 🏭 0
ort	Set sharing rules	No sharing rules have been set
te Report II porting Year	Delete Report	Set sharing rules

 Select each agency the report should be shared with from the drop-down menu under "Select Agency," and specify whether you would like those users to have view or edit access. Click "Add" for the agency to be added.

Share Report	×
Add User or Agency to share: Agency Select Agency	Can viev V Add
Sharing rules for report:	
Not shared	
Share Report	×
Add User or Agency to share:	Can view V Add
Sharing rules for report:	
Not shared	

3. Agencies that the report has been shared with should populate in the box under "Sharing rules for report." Make sure to add all participating investigating agencies to grant them access to the NORS report and close the window once you have finished sharing with all relevant agencies.

dd User o	or Agency to share:			
Agency	✓ Select Agency	•	Can view 💙	Add
naring ru	les for report:			
haring ru	les for report: Alabama Department of Public Health	Can view	Remove	
haring ru	les for report: Alabama Department of Public Health	Can view	Remove	

Viewing Multistate Outbreak Reports Entered by Other Agencies

-		•
Report		
State Report ID: Reporting Year:		
Agency: Owner:	CDC	
Change		
Sharing 🛔 0 🚓 3	1	^ 1
Sharing with: 0 Users, 3 Agencies		
Set sharing rules	·	

Reports that you have shared, or that have been shared with you, will be indicated in the "Shared" column on the Reports page; the number of agencies the report has been shared with will also be reflected in the "Sharing" section of the report panel. In the example to the left, the report has been shared with 3 agencies, which you can see reflected in the side panel.

If a multistate outbreak report has been shared with your agency, you can view the report in the NORS interface but may not be able to make changes to the report.

1. From the NORS home page, select "Reports."

2. Under "Agency," select the agency that granted read access; completing the other data fields, if known, will further narrow the search results. Alternatively, under "Shared," select all shared reports to filter to only shared reports.

NO	rs 👻												٥	6
≡ *	Home	REP	orts All	Reports ▼								+ Ne	w Report	• 🖓
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3. Select the report of interest to view it.

SEARCHING REPORTS

Users can use the search function on the Reports page to search a report by keywords or complete report IDs.

1. Within the Reports page in NORS, enter a keyword or complete report ID for the report being searched. The required report or reports matching the keywords entered will appear in the table below.

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2. Users can also search for keywords within each column with additional filter options highlighted below.

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EXPORTING REPORTS

NORS data can be exported as an Excel file or PDF. To export NORS data, find the report(s) you would like to export using the <u>Report Search</u> features described above. Select the reports you would like to export using the checkboxes in the left-most column of the Reports table. Then click the [...] button in the top right side of the window next to the lightbulb to show the action menu.

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			505168	cpm water3	Active	CDC	1/12/2023

Excel exports

To export data as an Excel file, select "Download reports data." A pop-up will open with options for the formatting of downloaded data. Select the desired format and click "Download."

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Sel	ect the desired export format:							
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PDF exports

To export data as a PDF, select "Create PDF Report" from the menu in the top right corner of the NORS window in either the Reports page or from the data entry page of an open report. A pop-up will open with options to include a cover page, summary information, and report details. If the option to include a cover page is selected, you may also customize the title and description of the generated PDF report. Once you have made your selection, click "Create." You will be redirected to a PDF reader.

To download the PDF, select the download icon from the toolbar and click "PDF."

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