

Foodborne Illness Outbreak Notification

General Information

Notification Date:	
Reporting Organization:	
Contact Person:	
Contact Information:	

Outbreak Details

Suspected Food(s)	
Date(s) of Consumption	
Location(s) Involved	
Number of People Exposed	

Clinical Information

Number of Cases	
Number Hospitalized	
Number of Deaths	
Symptoms Observed	
Date & Time of Onset	

Actions Taken

Brief Description:	
--------------------	--

Additional Notes