Hypothesis Generating Questionnaire for

Enter Pathogen (e.g., Salmonella Typhimuruim)

PulseNet Cluster Code

Section 1: Interviewer information *(Questions 1-5 to be completed by interviewer prior to questionnaire administration)*

1. PulseNet ID #: 2. State/Local/Other ID #:

3. Date of Interview *(must enter MM/DD/YYYY)*

4. Interviewer Information Name Contact Phone Number

Agency or Organization

5. Before this interview how many times has the case been interviewed about their illness? ◯ None ◯ Once ◯ Twice ◯ Three Times ◯ Other (Specify) ◯ Unknown

6. Respondent was: ◯ Self ◯ Parent ◯ Spouse ◯ Other (Specify)

Section 2: Demographic Data: I'd like to begin by asking a few questions about yourself (your child) and your household.

1. What are your state, county, and zip code? State County Zip Code

2. Birth month *(must enter 1-12)* Birth year *(must enter YYYY)* 3. Sex ◯ Male ◯ Female ◯ Unknown

4. Hispanic or Latino origin: ◯ Yes ◯ No ◯ Unknown

5. How would you describe your race? ◯ White ◯ Black/African American ◯ American Indian/Alaska Native ◯ Asian ◯ Native Hawaiian/Other Pacific Islander ◯ Other (Specify) ◯ Unknown

Section 3: Clinical Information: Now I have a few questions about your (your child's) illness.

1. What date did you first feel sick? *(must enter MM/DD/YYYY)*

YES	Maybe	NO	Don't Know	Did/Were you (your child)
◯	◯	◯	◯	2. Have any diarrhea (defined as at least 3 loose stools in 24 hours)
				2a. What day did it start? *(must enter MM/DD/YYYY)*
◯	◯	◯	◯	3. Hospitalized overnight?
◯	◯	◯	◯	4. Have any close contact with anyone with diarrhea or vomiting?
				4a. When was this person ill ◯ less than 24 hours before you ◯ ≥ 24 hours before you ◯ Unknown

5 . How many days total were you sick? or ◯ Still Ill

Section 4: Travel: Next I have a couple of questions about any travel you (your child) might have done, either as part of your work or for pleasure.

YES	Maybe	NO	Don't Know	Did/Were you (your child)
◯	◯	◯	◯	1. Did you spend all, or some, of the 7 days before you were ill outside your home state?
				1a. List all US states where you might have purchased or eaten foods. This would include foods eaten at airports, bus or train stations. Enter 2-letter postal abbrv(s): ◯ Unknown ◯ Did not travel to other US states
				1b. List all countries outside the US where you might have purchased or eaten foods. List countries & travel dates ◯ Unknown ◯ Did not travel outside the US

Section 4 Comments. *Please fill in any comments/notes from this section in the space provided*

∗ *If the case spent **the entire 7 days** before illness onset outside the US, please be sure countries and travel dates are noted and skip to the end of the interview (page 11).*

∗ *If the case spent **only part of the 7 days** before illness onset outside the US, please complete the remainder of the interview collecting only foods purchased or eaten in the US.*

Section 5: Food allergies, special diets, vitamins, & supplements: Now I have a few questions about food allergies and any special diets you (your child) may follow. I will also ask a few questions about vitamins and supplements you may have taken in the 7 days before your illness began.

YES	Maybe	NO	Don't Know	Did you (your child) have:
◯	◯	◯	◯	1. Any allergies that prevent you from eating a certain food(s)?
				1a. What foods? *Please check all that apply* ◯ milk ◯ eggs ◯ peanuts ◯ tree nuts ◯ fish ◯ soy ◯ wheat ◯ shellfish ◯ other (Specify)
◯	◯	◯	◯	2. Vegetarian or vegan diet?
◯	◯	◯	◯	3. Special or restricted diet (medical, weight-loss, religious, cultural, etc.)?
				3a. Please describe: ◯ Unknown
◯	◯	◯	◯	4. Any commercially bottled water in personal-sized containers?
◯	◯	◯	◯	5. Any commercially bottled water in large, multi-user tanks or water coolers?
◯	◯	◯	◯	6. Any vitamins, nutritional or herbal supplements, such as teas, tablets, and pills, etc.?
				6a. Please describe type, variety, brand: ◯ Unknown

Section 5 Comments. *Please fill in any comments/notes from this section in the space provided*

For Sections 6 and 7: *Read each type of store, point of purchase, or food outlet in the top section and ask respondent to list names for each category. The lists of store/ restaurant types are meant to prompt the respondent. Please list the names of all points of purchase/restaurants mentioned, regardless of category, in the space provided below.* ***You do not need to record a yes or no response for each category, only record the specific names and approximate locations reported in the space below.***

Section 6: Sources of food at home: Now I have a few questions about where the food came from that you ate **at home** in the 7 days before your illness began. This isn't necessarily where you shopped during that week, but where what you actually ate came from. I'm going to list several types of stores, for each type please tell me the names of each store you would have eaten food from during the 7 days before you were sick.

1. Did you (your child) eat foods from?

Grocery stores or Supermarkets	Health food stores or Co-ops
Warehouse stores such as Costco or Sam's Club	Fish or meat specialty shops (butcher's shop, etc.)
Small markets or Mini markets (convenience stores, gas stations, etc.)	Farmer's markets, Roadside stands, Open-air markets, or food purchased directly from a farm
Ethnic specialty markets (Mexican, Asian, or Indian groceries)	Any other sources of food at home that you ate during the 7 days before your illness began?

List Store/Retail Names and Locations:

Section 7: Sources of food outside the home: Now I have a few questions about where the food came from that you ate **outside your home** such as restaurants or fast food chains. I'm going to list several types of restaurant, for each type please tell me the names of each place you would have eaten food from during the 7 days before you were sick.

1. Did you (your child) eat foods from?

National fast food chains	Vegetarian or Vegan	All-you-can-eat Buffet
Mexican-style	Barbeque or Home-style	Sandwich shops or Delis
Italian	Steakhouse or Grill	Any take away/ take-out food
Seafood	Diner or Neighborhood Café	Breakfast or Brunch-style
Jamaican, Cuban, or Caribbean	Middle Eastern, Arabic, Lebanese, or African	A school or other institutional setting
Chinese, Indian, Japanese or other Asian-style	An event where food was served, such as a catered event, food festival, church or community meal, etc.	Any other restaurants or places you might have eaten at in the 7 days before your illness began?

List Store/Retail Names and Locations:

Section 8: Meat and Poultry: Now I have a few questions about meat and poultry that you (your child) might have eaten in the 7 days before your (your child's) illness began. This does not include canned items, but the meat and poultry could have been fresh, frozen, or could have been eaten as part of dish. You (your child) could have eaten these either in your home or outside the home. As I read each food, please answer as yes, no, may have eaten, or can't remember eating the food in the 7 days before you (your child) got sick.

First, I have questions about CHICKEN & OTHER POULTRY products.

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	1. Whole chicken or cut chicken pieces/parts?
				1a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
				1b. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)
◯	◯	◯	◯	2. Ground chicken?
◯	◯	◯	◯	3. Breaded chicken products, such as chicken tenders, strips, or nuggets?
◯	◯	◯	◯	4. Stuffed, frozen chicken products, such as chicken Kiev or chicken Cordon Bleu?
◯	◯	◯	◯	5. Any other frozen chicken products?
◯	◯	◯	◯	6. Duck, game hen, or squab?
◯	◯	◯	◯	7. Whole turkey or cut turkey pieces/parts?
				7a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
				7b. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)
◯	◯	◯	◯	8. Ground Turkey?

Section 8 Chicken/Poultry Comments. *Please fill in comments/notes from this section in the space provided* ____

Now I have questions about BEEF products

YES	Maybe	NO	Don't Know	In the 7 days before the illness began, did you (your child) eat any:
◯	◯	◯	◯	9. Beef steaks or roasts?
				9a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Purchased Frozen ◯ Purchased Fresh ◯ Was pink or red inside when eaten ◯ Not applicable (did not eat at home)
				9b. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)
◯	◯	◯	◯	10. Pre-made or pre-formed hamburger patties at home?
				10a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Was pink or red inside when eaten
◯	◯	◯	◯	11. Any fresh hamburger patties at home?
				11a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Was pink or red inside when eaten

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	12. Any dish with ground beef at home, such as casseroles, tacos, soups, or pasta sauces?
				12a. If eaten at home: Please describe the dish: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
◯	◯	◯	◯	13. Any ground beef outside the home? This could include foods such as hamburger or other dishes such as casseroles, tacos, soups, or pasta sauces.
				13a. Where did you eat this? Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
Section 8 Beef Comments. *Please fill in comments/notes from this section in the space provided*				

Now I have questions about PORK, LAMB, & OTHER MEAT products

YES	Maybe	NO	Don't Know	In the 7 days before the illness began, did you (your child) eat any:
◯	◯	◯	◯	14. Ground pork?
◯	◯	◯	◯	15. Any other pork product?
				15a. What was the type, variety, brand: ____ ◯ Unknown
◯	◯	◯	◯	16. Lamb?
◯	◯	◯	◯	17. Bacon?
◯	◯	◯	◯	18. Sausage?
◯	◯	◯	◯	19. Hot dogs, corn dogs, polish sausage, kielbasa, or similar product?
◯	◯	◯	◯	20. Pepperoni? This could have been on a sandwich or pizza.
◯	◯	◯	◯	21. Any other Italian-style meats, such as salami or prosciutto?
◯	◯	◯	◯	22. Bologna, pastrami, or corned beef?
◯	◯	◯	◯	23. Store-bought, dried meat strips or jerky?
◯	◯	◯	◯	24. Pre-packaged deli meats?
				24a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
◯	◯	◯	◯	25. Any other deli-sliced meat (not pre-packaged)?
				25a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
				25b. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)
◯	◯	◯	◯	26. Any other meat and/or poultry products, not mentioned already?
Section 8 Pork, Lamb, Other Meats Comments. *Please fill in comments/notes from this section in the space provided*				

Section 9: Fish and Seafood: Now I have some questions about fish and seafood you (your child) might have eaten in the 7 days before your (your child's) illness began. You (your child) may have eaten this at home or away from home. This does not include canned items, but these foods could have been eaten alone or as part of a dish, sauce, or dip. As I read each food, please answer as yes, no, may have eaten, or can't remember eating the food in the 7 days before you (your child) got sick.

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	1. Fresh or fresh-frozen fish?

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	2. Smoked or dried fish?
◯	◯	◯	◯	3. Shrimp or prawns?
◯	◯	◯	◯	4. Crab, lobster, or crayfish?
◯	◯	◯	◯	5. Oysters?
◯	◯	◯	◯	6. Clams, mussels, scallops, or other shellfish?
◯	◯	◯	◯	7. Sushi (with raw fish or seafood)?
◯	◯	◯	◯	8. Frozen fish product (fish sticks, nuggets, etc.)?
◯	◯	◯	◯	9. Any other fish or seafood?
				9a. What was the type, variety, brand: ◯ Unknown

Section 9 Comments. *Please fill in comments/notes from this section in the space provided*

Section 10: <u>Eggs, Dairy, and Cheese</u>: Now I have a few questions about eggs, dairy, and cheese products you (your child) might have eaten in the 7 days before your (your child's) illness began. You (your child) could have eaten these either in your home or away from home. As I read each food, please answer as yes, no, may have eaten, or can't remember eating the food in the 7 days before you (your child) got sick.

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	1. Eggs or egg-containing dishes?
◯	◯	◯	◯	1a. Were they raw, "runny", or "over-easy"?
				1b. If eaten <u>at home</u>, what was the: Type, variety, brand: Place purchased from (names, locations): ◯ Not applicable (did not eat <u>at home</u>)
				1c. If eaten <u>outside the home</u>, where? List name(s) and location(s): Describe the dish: ◯ Not applicable (did not eat <u>outside the home</u>)
◯	◯	◯	◯	2. Anything made with raw eggs (cookie dough, cake batter, sauces, homemade ice cream or mayo, etc.)?
◯	◯	◯	◯	3. Milk?
				3a. What was the type, variety, brand: ◯ Unknown
				3b. Raw or unpasteurized? ◯ Yes ◯ No ◯ Maybe ◯ Unknown
◯	◯	◯	◯	4. Ice cream or ice cream products?
				4a. If eaten <u>at home</u>, what was the: Type or brand (bar, tub, carton, etc.) Variety or flavor? ◯ Unknown
◯	◯	◯	◯	5. Frozen yogurt?
◯	◯	◯	◯	6. Yogurt drinks?
◯	◯	◯	◯	7. Any other yogurt?
◯	◯	◯	◯	8. Prepackaged, shredded cheese?
				8a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	9. Processed, sliced cheese?
◯	◯	◯	◯	10. Block-type cheese (cheddar, Swiss, Colby, Jack, etc.)?
				10a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	11. String-type cheese?
◯	◯	◯	◯	12. Cottage cheese?
◯	◯	◯	◯	13. Cheese curds?
◯	◯	◯	◯	14. Feta cheese? This could have been part of a dish or salad.

YES	Maybe	NO	Don't Know	In the 7 days before the illness began, did you (your child) eat any:
◯	◯	◯	◯	15. Blue veined cheese (gorgonzola, bleu)?
◯	◯	◯	◯	16. Fresh or dried Parmesan, Romano, or similar cheese?
◯	◯	◯	◯	17. Cheese from raw/unpasteurized milk (homemade, farm-fresh, door-to-door cheeses)?
◯	◯	◯	◯	18. Mexican-style soft cheese (queso fresco, queso blanco)?
◯	◯	◯	◯	18b. Was it homemade?
◯	◯	◯	◯	19. Any other gourmet or artisanal cheese?
				19a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	20. Any other dairy product?
				20a. What was the type, variety, brand: ◯ Unknown

Section 10 Comments. *Please fill in comments/notes from this section in the space provided*

Section 11: Fresh fruits: Now I have some questions about fresh fruits, not canned, cooked, or frozen, you (your child) might have eaten in the 7 days before your (your child's) illness began. You (your child) could have eaten these either in your home or away from home. As I read each food, please answer as yes, no, may have eaten, or can't remember eating the food in the 7 days before you (your child) got sick.

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	1. Apples?
				1a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	2. Grapes?
				2a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	3. Pears?
◯	◯	◯	◯	4. Peaches?
◯	◯	◯	◯	5. Nectarines?
◯	◯	◯	◯	6. Apricots?
◯	◯	◯	◯	7. Plums?
◯	◯	◯	◯	8. Oranges?
◯	◯	◯	◯	9. Grapefruit?
◯	◯	◯	◯	10. Tangerines?
◯	◯	◯	◯	11. Fresh lemon or lime? This could include garnishes on a drink, etc.
◯	◯	◯	◯	12. Strawberries?
◯	◯	◯	◯	13. Raspberries?
◯	◯	◯	◯	14. Blueberries?
◯	◯	◯	◯	15. Blackberries?
◯	◯	◯	◯	16. Cherries?
◯	◯	◯	◯	17. Any other fresh berries?
				17a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	18. Cantaloupe?
◯	◯	◯	◯	19. Honeydew melon?
◯	◯	◯	◯	20. Watermelon?
◯	◯	◯	◯	21. Precut melon or melon salad? Sometimes served on salad bars or breakfast buffets
◯	◯	◯	◯	22. Any other melon?

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	23. Pineapple?
◯	◯	◯	◯	24. Mango?
◯	◯	◯	◯	25. Coconut (whole or shredded)?
◯	◯	◯	◯	26. Any other tropical fruit (kiwi, papaya, guava, pomegranate, etc.)?
				26a. What was the type, variety, brand: ____ ◯ Unknown
◯	◯	◯	◯	27. Frozen berries?
◯	◯	◯	◯	28. Other frozen fruit?
◯	◯	◯	◯	29. Raisins?
◯	◯	◯	◯	30. Other dried fruit?
				30a. What was the type, variety, brand: ____ ◯ Unknown
◯	◯	◯	◯	31. Apple juice (not from concentrate)?
◯	◯	◯	◯	32. Orange juice (not from concentrate)?
◯	◯	◯	◯	33. Any other juice (not from concentrate)?
				33a. What was the type, variety, brand: ____ ◯ Unknown
◯	◯	◯	◯	34. Juice from frozen concentrate?
◯	◯	◯	◯	35. Any unpasteurized or raw juices or ciders?

Section 11 Comments. *Please fill in comments/notes from this section in the space provided* ____

Section 12: <u>Fresh Vegetable</u>: Now I have some questions about fresh vegetables you (your child) might have eaten raw or uncooked in the 7 days before your (your child's) illness began. You (your child) could have eaten these either in your home or away from home. This does not include canned items, but these foods could have been eaten alone or as part of a dish. I am only interested in vegetables that are <u>not</u> grown at home. As I read each food, please answer as yes, no, may have eaten, or can't remember eating the food in the 7 day before you (your child) got sick.

First, I have questions about TOMATOES & LEAFY GREENS

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	1. Fresh tomatoes?
				1a. If eaten <u>at home</u>, what was the type, variety: ◯ Red Round ◯ Roma ◯ Cherry ◯ Grape ◯ 'Vine-ripe', sold on the vine ◯ other (Specify) ____ ◯ Unknown Place purchased from (names, locations): ____ ◯ Not applicable (did not eat <u>at home</u>)
				1b. If eaten <u>outside the home</u>, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat <u>outside the home</u>)
◯	◯	◯	◯	2. Fresh tomatoes on sandwich, burger, or salad?
◯	◯	◯	◯	3. Fresh salsa or pico de gallo (not from a jar or can)?
				3a. If eaten <u>at home</u>, what was the: Type, variety (red, green): ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat <u>at home</u>)
				3b. If eaten <u>outside the home</u>, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat <u>at home</u>)
◯	◯	◯	◯	4. Guacamole?
◯	◯	◯	◯	5. Fresh, uncooked leafy greens such as spinach, lettuce, etc.?
				5a. Prepackaged or loose? ◯ Prepackaged ◯ Loose ◯ Unknown
				5b. If eaten <u>at home</u>, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat <u>at home</u>)
				5c. If eaten <u>outside the home</u>, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat <u>outside the home</u>)

◯	◯	◯	◯	6. Lettuce on a sandwich, burger, or as garnish?
◯	◯	◯	◯	7. Iceberg lettuce?
				7a. Prepackaged or head/loose? ◯ Prepackaged ◯ Head/Loose ◯ Unknown
				7b. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
				7c. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)
◯	◯	◯	◯	8. Romaine lettuce?
				8a. Prepackaged or loose? ◯ Prepackaged ◯ Loose ◯ Unknown
				8b. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
				8c. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)
◯	◯	◯	◯	9. Fresh spinach?
				9a. Prepackaged or loose? ◯ Prepackaged ◯ Loose ◯ Unknown
				9b. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
				9c. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)
◯	◯	◯	◯	10. Cabbage?
◯	◯	◯	◯	11. Other leafy lettuce (red, butter, radicchio, “spring mix”, “baby” salad greens, etc.?

Section 12 Tomato & Leafy Greens Comments. *Please fill in comments/notes from this section in the space provided*

Now I have questions about herbs & sprouts you (your child) may have eaten in the 7 days before illness began. Remember, these could have been part of a dish such as pesto, salsa, sauces, etc. We are interested in fresh herbs, not dried or bottled herbs.

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	12. Fresh Basil?
◯	◯	◯	◯	13. Fresh cilantro?
◯	◯	◯	◯	14. Other fresh herbs (parsley, sage, thyme, dill, etc.)?
				14a. What was the type, variety, brand: ____ ◯ Unknown
◯	◯	◯	◯	15. Alfalfa sprouts?
				15a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
				15b. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)
◯	◯	◯	◯	16. Other sprouts (bean, clover, broccoli, daikon radish, etc.)?
				16a. If eaten at home, what was the: Type, variety, brand: ____ Place purchased from (names, locations): ____ ◯ Not applicable (did not eat at home)
				16b. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)

Section 12 Herbs & Sprouts Comments. *Please fill in comments/ notes from this section in the space provided*

Next I have a few questions about other fresh vegetables you (your child) may have eaten in the 7 days before your illness began.

YES	Maybe	NO	Don't Know	In the 7 days before the illness began, did you (your child) eat any:
◯	◯	◯	◯	17. Cucumbers, zucchini, squash?
◯	◯	◯	◯	18. Bell peppers (green, red, orange, or yellow)?
◯	◯	◯	◯	19. Hot chili/chile peppers (such as jalapenos or serranos)?
◯	◯	◯	◯	20. Celery?
◯	◯	◯	◯	21. "Mini" carrots? These are often peeled and sold in a sealed bag.
◯	◯	◯	◯	22. Other fresh carrots?
◯	◯	◯	◯	23. Other raw root vegetables (radishes, beets, turnips, etc.)?
				23a. What was the type, variety, brand: ____ ◯ Unknown
◯	◯	◯	◯	24. Fresh, raw peas? May be shelled or in the pod
◯	◯	◯	◯	25. Broccoli?
◯	◯	◯	◯	26. Cauliflower?
◯	◯	◯	◯	27. Raw onions (white, yellow, or red/purple)?
◯	◯	◯	◯	28. Raw green onions/scallions?
◯	◯	◯	◯	29. Fresh or dried mushrooms?

Section 12 Other Vegetable Comments. *Please fill in comments/notes from this section in the space provided*

Section 13: Frozen Foods: Now I have a few questions about frozen foods you (your child) might have eaten in the 7 days before your (your child's) illness began. You (your child) could have eaten these either in your home or outside the home. As I read each food, please answer as yes, no, may have eaten, or can't remember eating the food in the 7 days before you (your child) got sick.

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	1. Frozen vegetables (in bag or box)?
◯	◯	◯	◯	2. Frozen pot pies?
◯	◯	◯	◯	3. Frozen pizza?
◯	◯	◯	◯	4. Frozen Mexican-style foods (burritos, etc.)?
◯	◯	◯	◯	5. Frozen snack foods like mozzarella sticks, jalapeno poppers, potato skins, or hot pockets?
◯	◯	◯	◯	6. Frozen breakfast items (waffles, breakfast sandwiches, etc.)?
◯	◯	◯	◯	7. Frozen vegetarian foods such as a garden burger?
◯	◯	◯	◯	8. Frozen pre-mixed meals in a bag or box (stir fry, pasta meals, etc.)?
◯	◯	◯	◯	9. Frozen dinners or box entrees?
◯	◯	◯	◯	10. Other frozen, prepackaged product not mentioned previously?
				10a. What was the type, variety, brand: ____ ◯ Unknown

Section 13 Comments. *Please fill in comments/notes from this section in the space provided*

Section 14: Nuts, Cereal, Processed, and Dried Foods: Now I have some questions about nuts, cereals, and processed foods you (your child) might have eaten in the 7 days before your (your child's) illness began. You (your child) could have eaten these either in your home or away from home. As I read each food, please answer as yes, no, may have eaten, or can't remember eating the food.

YES	Maybe	NO	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	1. Pre-packaged peanut butter crackers?
◯	◯	◯	◯	2. Any peanut butter?
				2a. If eaten at home, what was the brand, type/variety: Brand ____ ◯ Creamy ◯ Crunchy ◯ Unknown ◯ Not applicable (did not eat at home)
				2b. If eaten outside the home, where? List name(s) and location(s): ____ ◯ Not applicable (did not eat outside the home)

◯	◯	◯	◯	3. Peanut butter containing foods (cookies, candies, ice cream, etc.)?
				3a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	4. Ground nut butter or spread other than peanut butter (Nutella, almond butter)?

Next I have questions about nuts and seeds you (your child) might have eaten. Remember that these may be used as toppings or mixed into many foods. If you (your child) ate any of the nuts below as part of another food please answer "yes". Did you (your child) eat any of the following:

YES	Maybe	**NO**	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	5. Peanuts?
◯	◯	◯	◯	6. Almonds (whole, sliced, chopped, etc.)?
◯	◯	◯	◯	7. Walnuts?
◯	◯	◯	◯	8. Cashews?
◯	◯	◯	◯	9. Pistachios?
◯	◯	◯	◯	10. Hazelnuts or filberts?
◯	◯	◯	◯	11. Other whole nuts or mixed nuts?
◯	◯	◯	◯	12. Sunflower seeds?
◯	◯	◯	◯	13. Sesame seeds?
◯	◯	◯	◯	14. Tahini, halva, or other product made from sesame seeds?
◯	◯	◯	◯	15. Hummus?

Section 14 Peanut butter/Nuts/ Seeds Comments. *Please fill in comments/notes from this section in the space provided*

Now I have questions about pre-packaged snack foods and cereals you (your child) might have had in the 7 days before your (your child's) illness began.

YES	Maybe	**NO**	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	16. Granola bars, breakfast, power, or protein bars?
				16a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	17. Trail mix (or similar product)?
◯	◯	◯	◯	18. Fruit roll-ups (or similar product)?
◯	◯	◯	◯	19. Chips or pretzels?
				19a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	20. Pre-packaged crackers, cookies, or snack cakes?
				20a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	21. Chocolate or chocolate-containing candy?
				21a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	22. Cold breakfast cereal?
				22a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	23. Hot breakfast cereals like oatmeal, cream of wheat, etc.?
				23a. What was the type, variety, brand: ◯ Unknown

Section 14 Snack foods/Cereal Comments. *Please fill in comments/ notes from this section in the space provided*

And finally I have questions about dried, powdered products and supplements you (your child) might have had in the 7 days before your (your child's) illness began.

YES	Maybe	**NO**	Don't Know	Did you (your child) eat any:
◯	◯	◯	◯	24. Dried buttermilk?

◯	◯	◯	◯	25. Flavored milk powder (such as chocolate or vanilla)?
◯	◯	◯	◯	26. Other powdered milk products?
◯	◯	◯	◯	27. Powdered nutritional supplement products?

Section 14 Dried/Powdered foods Comments. *Please fill in comments/notes from this section in the space provided*	

Section 15: We have covered a wide variety of foods, drinks, etc. After answering all these questions are there any other things you (your child) ate or drank in the 7 days before becoming ill that have not been mentioned?

1. Please describe any other foods, drinks, etc. including as much detail as possible regarding type, variety, or brand.	

Section 16: <u>Animal contact and Pets</u>: Now I have some questions about contact with pets or other animals in the 7 days before your (your child's) illness began. This could have been at your home or another home, at a pet store, petting zoo, school, or other location.

YES	Maybe	NO	Don't Know	Did you (your child) visit or go to:
◯	◯	◯	◯	1. A petting zoo or farm with livestock like cattle, sheep, goats, etc.?
◯	◯	◯	◯	2. Agricultural `Farm and Feed' stores?
◯	◯	◯	◯	3. Pet stores, swap meets, other places where animals/birds were sold or shown?
◯	◯	◯	◯	4. County/State fairs, 4-H events, or similar event where animals were present?
◯	◯	◯	◯	5. School events, birthday parties, or similar events with animals/pets?
				Did you (your child) have any contact with:
◯	◯	◯	◯	6. Dogs or puppies?
◯	◯	◯	◯	7. Cats or kittens?
◯	◯	◯	◯	8. Baby chicks, duckling, or other baby poultry?
◯	◯	◯	◯	9. Live chickens, turkeys, or other adult poultry?
◯	◯	◯	◯	10. Turtles or tortoises?
◯	◯	◯	◯	11. Snakes?
◯	◯	◯	◯	12. <u>Frozen</u> mice, rats, or similar pet food for snakes?
◯	◯	◯	◯	13. Other reptiles, such as lizards, geckos, etc.?
◯	◯	◯	◯	14. Amphibians, such as frogs, toads, or salamanders?
◯	◯	◯	◯	15. Water pets in an aquarium (goldfish, aquatic frogs, snails, etc.)?
◯	◯	◯	◯	16. Rats, mice, gerbils, or hamsters?
◯	◯	◯	◯	17. “Pocket” or “exotic” pets (ferrets, pygmy hedgehogs, rabbits, sugar gliders, guinea pigs, etc.)?
◯	◯	◯	◯	18. Prepackaged pet food (canned or dry)?
				18a. What was the type, variety, brand: ◯ Unknown
◯	◯	◯	◯	19. Pet treats or chews (pig ears, puzzles, rawhide, hooves, etc.)?
◯	◯	◯	◯	20. Dried animal droppings or pellets (e.g., owl pellets for science projects)?

Section 16 Comments. *Please fill in comments/notes from this section in the space provided*	

That completes the interview, thank you for taking the time to answer all these questions. Your responses may be helpful in preventing others from becoming sick. *(refer to closing script as needed)*

Prior to submitting or printing this form,
please be sure that all necessary sub-questions (including unknown values for sub-questions) and comments are complete.

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