Foodborne Final Report

User: DAVID HENNINGS

Prelim Report #: ORS-1195775 **Outbreak #:** IL2020-0199

Core Report Section

Person Submitting: Shana Altman Report Submission Date: 02/21/2020

LHD (Primary Jurisdiction): Illinois Dept. of Public Health

Partner Jurisdictions:
- Adams County Health Department
- Champaign-Urbana Public Health Department
- Jackson County Health Department
- Woodford County Health Department

Mode of Transmission

Mode of Transmission : Foodborne

Other Mode of Transmission:

Description of Outbreak

CDC, public health and regulatory officials in several states, and the U.S. Food and Drug Administration (FDA) investigated a multistate outbreak of E. coli O103 infections linked to clover sprouts. A total of 51 people infected with the outbreak strain of E. coli O103 were reported from 10 states (FL, ID, WY, UT, IA, MO, TX, VA and NY. Illnesses started on dates ranging from January 6, 2020, to March 15, 2020. Ill people ranged in age from 1 to 79 years, with a median age of 29 years. Fifty-five percent of ill people were female. Of 41 ill people with information available, 3 were hospitalized and no deaths were reported. Seventeen (63%) of 27 people interviewed reported eating sprouts at a Jimmy John's restaurant. Jimmy John's LLC reported that all of their restaurants stopped serving clover sprouts on February 24, 2020. FDA identified the outbreak strain of E. coli O103 in samples of Chicago Indoor Garden products that contain sprouts. Six of the 7 Il cases were interviewed and 5 reported yes or maybe to Jimmy John's with 3 locations identified and one location unknown. Only one IL case was able to provide a meal date which was 01/23/2020. This exposure date was removed from the report as an ORS rule prevented it from being submitted due to the first exposure date occurring after the first onset date in the report.

Location of Exposure

Site of Outbreak	Type of Setting	Address	County	Country
Jimmy John's	Restaurant - Fast Food	,unspecified, IL	Unspec In IL	United States
Jimmy John's	Restaurant - Fast Food	4500 Broadway,Quincy, IL	Adams	United States
Jimmy John's	Restaurant - Fast Food	1511 N. Prospect Ave.,Champaign, IL	Champaign	United States
Jimmy John's	Restaurant - Fast Food	515 1/2 S Illinois Ave,Carbondale, IL	Jackson	United States

Location of Source

Name of Source	Type of Source	Address	County	Country
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Suspect or Confirmed Etiology Information

Etiology/Genus	Species/Types	Serotype/Genotype/Subtype	Capsid	Polymerase	Etiology Status
Escherichia	Coli, shiga toxin-producing	O103			Confirmed

Samples Tested

Were Human Specimens (not from a food handler) tested? (Required) Yes

If yes, # Specimens Tested (Required): 7 # Laboratory Confirmed (Required): 7

Were Food Handler Specimens tested? No

If yes, # Specimens Tested (Required): # Laboratory Confirmed (Required):

Were Animal Specimens tested? No

If yes, # Specimens Tested:

Were Food Samples tested? Yes

If yes, # Samples Tested:

Were Water Samples tested? Yes

If yes, # Samples Tested:

Were Other Environmental Samples tested? Yes

If yes, # Samples Tested:

Laboratory Testing Details (each pathogen for which testing was conducted)

Type of Specimen	Patient Specimen
Sample Source	Stool
Organism/Genus Tested for	Escherichia
Species/Types	Coli, shiga toxin-producing
Serotype/Genotype/Subtype	O103:H2
Capsid	
Polymerase	
Test for	• Culture
# Tested	7
# Positive	7
Subtype / PFGE	
WGS Code	

Estimated number of persons reported to be ill from this outbreak (excludes food handlers suspected to be the source of the outbreak)? (Required): 7

Exposure Information

Date of First Exposure: Date of Last Exposure:

Non-staff Exposed: **(e.g. residents or patrons)** # Staff Exposed:

Visitors Exposed:

Total # Persons Exposed:

Case Illness Information

Date of First Onset: 01/10/2020 Date of Last Onset: 02/06/2020

Non-staff meeting Illness Case Definition: **(e.g. residents or patrons)** 7

Staff meeting Illness Case Definition:

Visitors meeting Illness Case Definition:

_____

Total # meeting Illness Case Definition: 7

Attack rate (percentage): %

Seen by Health Care Provider (excluding ER visits) that meet Case Definition: 6

Cases with Info Available about Health Care Provider Visit: 7

Visited ER that meet Case Definiton: 1

Cases with Info Available about ER Visit: 7

Hospitalized that meet Case Definition: 0

Cases with Info Available about Hospitalization: 7

Fatalities that meet Case Definition: 0

Cases with Info Available about Fatalities: 7

Location of ills within the facility:(Ex: classroom, floor, wing, cell block)

Describe Illness (percent of ills with each symptom):

Major Signs and Symptoms	# Cases Reporting Symptoms	# Cases Asked about Symptoms	% with Symptom
HUS (hemolytic uremic syndrome)	0	4	0%
diarrhea (3 or more loose stools in a 24 hr period)	7	7	100%
vomiting	1	7	14%
fever	6	6	100%

bloody stools	2	7	28%

Describe any factors which contributed to the outbreak:

Preventive/Control measures taken: Interview of Ill only; Kitchen/food facility inspection; Multi-state outbreak-CDC managing control measures; Press announcement

Other Control measures taken:

Date first control measure initiated :

General Information

Investigation Methods

Investigation Methods: Environment/food/water sample testing conducted by a different agency; Food product or bottled water traceback; Food product or bottled water traceback conducted by a different agency; Interviews only of ill persons

Other Investigation Method:

Comments:

Geographic Location

Did exposure occur in multiple states? (•) Yes ( ) No ( ) Unknown

Not Available

Did exposure occur in a single state, but cases resided in multiple states? ( ) Yes (•) No ( ) Unknown

Cases resided in Multiple States

Not Available

Did exposure occur in multiple counties? (•) Yes ( ) No ( ) Unknown

Counties: Adams; Champaign; Jackson; Woodford

Did exposure occur in a single county, but cases resided in multiple counties in reporting state? ( ) Yes (•) No ( ) Unknown

Counties: Select Some Options

Primary Case Demographics

Note: Percentages are calculated using Total # meeting Illness Case Definition **(7)** as the denominator.
Do not include food handler data below.

Sex

	# of Cases	% of Cases

Age

	# of Cases	% of Cases		# of Cases	% of Cases

# Male:	3	42.85	%	< 1 yr:			%	1 - 4 yrs:	1	14.28	%
# Female:	4	57.14	%	5 - 9 yrs:			%	10 - 19 yrs:	1	14.28	%
# Unknown:			%	20 - 49 yrs:	3	42.85	%	50 - 74 yrs:	2	28.57	%
				≥ 75 yrs:			%	Unknown:			%

Incubation and Duration

Incubation Period

☐ Unknown incubation period

Shortest:	4.0	Days
Median:	4.0	Days
Longest:	4.0	Days
Total # of cases for whom info is available:	1	

Duration of Illness

☑ Unknown duration of illness

Shortest:		
Median:		
Longest:		
Total # of cases for whom info is available:		

Secondary Cases

☑ No Secondary cases

Mode of Secondary Transmission:

Other Mode of Transmission:

Lab-confirmed secondary cases: # Probable secondary cases:

Estimated total secondary cases: # Estimated total cases (Primary + Secondary):

Comments:

Food Specific Data

If an Outbreak is associated with restaurant,

Please specify restaurant type:

Was a food vehicle identified: ◉ Yes ○ No

Food Vehicle

Category	Other
Food Name	• Clover Sprouts
Additional Food Name	
Ingredients	
Additional Ingredients	clover seed
Contaminated Ingredients	
Other Contaminated Ingredients	clover seed
# Cases exposed to implicated food	2
# Cases asked about implicated food	6
Confirmed or Suspected Vehicle	Confirmed

Reason(s) confirmed of suspected	• Laboratory evidence (e.g. identification of agent in food) • Statistical evidence from epidemiological investigation • Traceback and/or environmental investigation
Method of Processing	• None
Method of Preparation	Ready to eat food - No manual preparation, No cook step.
Level of Preparation	Foods eaten raw with minimal or no processing.
Site of food preparation	Restaurant - Fast Food
Preparation site comments	
Site of food consumption	
Consumption site comments	Number of cases exposed included in this table is for IL cases
Contaminated Food Imported	No
Produced under regulatory oversight and sold	Yes

Reason(s) foodborne, but undetermined vehicle (Required): Select Some Options

Other data description:

Was there a kitchen manager certified in food safety at the location of preparation: ○ Yes ○ No ◉ Unknown

Contributing Factors

☐ Contributing Factors Unknown

Contamination Factors: Contaminated raw product-food intended to be consumed raw or; Foods originating from sources shown to be contaminated or p

Proliferation/Amplification Factors: (bacterial outbreaks only) Select Some Options

Survival Factors: Select Some Options

Point of contamination

When did confirmed/suspected contamination occur? Before Preparation

If before preparation, specify detail: Pre-Harvest

Reason(s) confirmed or suspected: Environmental evidence; Prior experience makes this a likely source

Food Handler Section

Testing

Were food handlers tested? No

If yes, please specify

tested for Salmonella:

tested for STEC:

tested for Norovirus:

tested for Other:

Specify Organism and Source:

Reporting

Did food handlers report diarrhea and/or vomiting? Yes No Unknown

If yes, were any ill prior to, during or within one day after the date of exposure:

If yes, please specify

reporting diarrhea and/or vomiting:

food handlers became ill during the same period as the outbreak cases:

Was food-worker implicated as the source of contamination? Yes No Unknown

if yes, please select one from the list:

Comments

Outbreak Type Section

School

Did the outbreak involve multiple schools? If yes, # of schools involved:

Total # of students (approximate enrollment): Unknown or undetermined

Grade Level(s): Select Some Options

Primary funding:

Implicated item preparation: Select Some Options

Other Implicated item preparation:

How many times has the state, county or local health department inspected this school cafeteria or kitchen in the 12 months before the outbreak? *

Does the school have a HACCP plan in place for the school feeding program? *

*If multiple schools are involved, please answer according to the most affected school

Was implicated food item provided to the school through the National School Lunch/Breakfast program?

Was the implicated food item donated/purchased by:

Donated/purchased by other:

Ground Beef

What percentage of ill persons (for whom information is available) ate ground beef raw or undercooked? %

Was ground beef case-ready?
(Case-ready ground beef is meat that comes from a manufacturer packaged for sale that is not altered or repackaged by the retailer.)

Where was beef processed
(e.g. Name of retailer or meat locker)?

Was the beef ground or reground by the retailer?

Was anything added to the beef during grinding (such as shop trim or any product to alter the fat content)?

Eggs / Salmonella

Were eggs (Select all that apply): Select Some Options

Was Salmonella enteritidis found on the farm?

Food Comments

Comments:

Food Admin Section

Traceback

Was food or bottled water traceback conducted? (•) Yes ( ) No ( ) Unknown

Who conducted traceback ? IDPH | Other State Health Department(s) | Federal Partners

Name of Source	Type of Source	Address	Traceback Comments
Chicago Indoor Garden		,Chicago, IL	Illinois collected invoices for Jimmy John's locations identified and provided the information to FDA. Jimmy John's in Champaign received their sprouts from Battaglia who received their sprouts from Chicago Indoor Garden. Jimmy John's in Quincy and Carbondale also used Sysco, who received their sprouts from Living Waters. Living Waters received their sprouts from Chicago Indoor Garden.

Recall

Was food or bottled water product recalled? (•) Yes ( ) No ( ) Unknown

Type of item recalled: clover sprouts

Recall comments:

On March 16, 2020, Chicago Indoor Garden recalled all products containing red clover sprouts.

Isolate/Lab Information

CDC System	State Lab ID	PulseNet Outbreak Code	CDC PulseNet Pattern for Enzyme 1	CDC PulseNet Pattern for Enzyme 2	CaliciNet sequenced region/whole genome sequencing ID	CaliciNet genotype/other molecular designation
PulseNet	MO___337579	2002IAEXW-1				
PulseNet	IL2__S200023813	2002IAEXW-1				
PulseNet	MO___338201	2002IAEXW-1				
PulseNet	IL2__S200023812	2002IAEXW-1				
PulseNet	IL2__S200023817	2002IAEXW-1				
PulseNet	IL2__S200023814	2002IAEXW-1				
PulseNet	IL2__S200023150	2002IAEXW-1				

Antibiotic Resistance

Was antimicrobial susceptibility testing (AST) performed? Yes

If yes, where was AST performed? (select all that apply) WGS

Please specify

tested: 7

Antibiotics resistance to: One isolate showed resistance to Streptomycin, Tetracycline, Su

If yes, were any antimicrobial resistant isolates associated with the outbreak? (•) Yes ( ) No ( ) Unknown

Admin Section

Investigation Status : Closed

Final Report Submitted Date : 11/05/2020

Outbreak Status : Counted by Illinois

Year Counted : 2020

Healthcare-associated Outbreak? No

Multi-State Cluster Code:

Additional Affected Areas: Multi-State

IDPH Staff member assigned to this Outbreak:

Type of Assistance Provided by IDPH: Brief consultations; Data entry and analysis assistance; IDPH Clinical Lab Testing; Multi-county or multi-state coordination

Primary Exposure Location (Required):

Jimmy John's-Restaurant - Fast Food;,unspecified,Unspec In IL

Specimens Sent to CDC

Specimens sent to NARMS (Salmonella, STEC, Shigella): ○ Yes ◉ No ○ Unknown

Specimens sent for Genotyping (Norovirus - not LTCF or School): ○ Yes ◉ No ○ Unknown

Admin Comments:

CDC ID: 296209