

Pt. name _____ Phone Number _____

Respondent interviewed: (if patient or relative) _____

Date/Time of call _____

Establish onset date _____

Ask all subsequent questions in regarding to the two weeks before onset date,

back to _____ (day of week) _____ (month, date)

“In the 2 weeks before you got ill did you:”

Visit any hospital? _____ Patient _____ Medical appt/procedure _____ Visitor _____ Employee _____

Which Hospitals _____

Visit any clinics? _____ Patient _____ Medical appt/procedure _____ Visitor _____ Employee _____

Clinic _____

Did you have any dental work done ? If yes: Office _____

Visit any nursing homes? _____

Any overnight travel? _____ Destinations? _____

Do you remember Hotels where you stayed? _____

Did you visit a hotel without staying overnight? If yes which one _____

What did you do there (wedding, dinner swimming? etc.) _____

Did you use a whirlpool or hot tub in those two weeks? _____

If yes, where? _____

Did you go swimming in those two weeks,

IF yes _____ where? _____

Also, were there any fountains, etc. where you went swimming _____

Did you take a shower anywhere away from home in those two weeks? _____

Do you have a humidifier at home that you were using in those two weeks? _____

If yes type _____

Do you use city water or well water? _____

Did you work on any plumbing projects in those two weeks? _____

Describe _____

Did you have any shopping trips to any area malls during those two weeks?

If yes, which ones _____

Where did you shop for any groceries during those two weeks? (specific stores and locations)

Would you have shopped in the produce area of this (these) stores do you think? _____

Do you recall being near any fountains in the two weeks before you got ill, for example at shopping malls, public plazas, casinos, home and garden shows, etc. _____

If yes, where? _____

Do you work full or part time? _____ Where/What job? _____

Details of work in two weeks before illness (e.g., if outside delivery route, where were you working over this period)
