

### **DEPARTMENT OF HEALTH & HUMAN SERVICES**

Public Health Service Centers for Disease Control and Prevention (CDC)

Date: March 29, 2006

From: Antonio Neri, M.D., EIS Officer, Environmental Health Services Branch (EHSB),

Division of Emergency and Environmental Health Services (DEEHS), National Center

for Environmental Health (NCEH)

To: David Forney, Chief, Vessel Sanitation Program, DEEHS, NCEH

Subject: Trip Report: Outbreak of Gastrointestinal Illness Aboard Cruise Ship MS Explorer of the

Seas, Miami, Florida

Through: Marilyn Radke, M.D., M.P.H., Acting Director DEEHS, NCEH

Hugh Mainzer, MS, DVM, DACVPM Supervisory Preventive Medicine Officer

## Introduction

CDC's Vessel Sanitation Program (VSP) conducts surveillance for gastrointestinal (GI) illness aboard passenger cruise ships calling on U.S. ports. All passenger ships with a foreign itinerary that call on U.S. ports are required by law to notify the VSP at least 24 hours before arriving in this country of the percentage of passengers and crew reporting GI illness during the previous 15 days. Ships reporting that more than 3% of either passengers or crew have gastrointestinal illness are investigated by VSP.

## **Background**

On March 1, 2006, Royal Caribbean International Cruise Line (RCI) notified VSP that 68 cases (2%) of GI illness had been reported to the infirmary among passengers and 3 cases (0.25%) among crew members aboard their ship, the MS *Explorer of the Seas*. On February 26, 2006, the ship sailed from Miami, Florida, with 3,245 passengers and 1,184 crew members (Appendix A). The GI illness log faxed from the ship to VSP showed that the first GI illness case was reported on February 26, 2006. Between February 26, 2006, and March 1, 2006, 129 cases (4%) were reported among the passengers and 7 cases (0.6%) were reported among the crew, with a single peak of 68 persons reporting to the infirmary on February 28, 2006 (Appendix B). An epidemic curve diagramming the number of cases by onset date was constructed showing that symptoms actually began on February 27, 2006 (Appendix C).

At the request of the VSP epidemiologist, the Epidemic Intelligence Service (EIS) officer from CDC's National Center for Environmental Health assisted in the investigation to determine the characteristics and extent of GI illness aboard the MS Explorer of the Seas, the causal pathogen, the potential modes of illness transmission, and enact public health intervention and control.

## **Objectives**

The primary objectives of this investigation were to:

- determine the etiology of the outbreak,
- determine the method of transmission among passengers and crew,
- develop recommendations to stop the current spread of the illness and prevent future occurrences of illness.

### **Methods**

<u>Focused environmental inspection</u> A team of VSP inspectors conducted a focused environmental inspection of the entire ship the morning she docked in Miami to disembark passengers. These inspections concentrated on critical control areas of the ship where a breakdown in system function could introduce pathogens into the ship's food or water supply. All company outbreak response protocols and general operational procedures were reviewed with each department manager and selected staff to determine compliance. Inspections were conducted throughout the time the team was aboard the ship.

<u>Laboratory specimens collected</u> Once notified of the outbreak VSP requested that the ship's infirmary collect stool specimens from crew and passengers reporting GI illness. These specimens were sent to University of Arizona (UA) laboratories for analysis.

<u>Spatial analysis</u> A map was made of the cabins of passenger cases reported to the infirmary to determine if a correlation existed in space and time between cases.

Identification of cases The investigators generated several hypotheses on the basis of interviews with RCI administration, ship staff, and a review of the ship's GI illness log. Given the shape of the epidemic curve and symptom profile from the GI illness log, it was initially thought that a common-source (i.e. food-borne) outbreak was occurring among passengers (Appendix B). Interviews with the ship's staff indicated that the illness was characterized by a rapid onset, short duration, and was self-limited. Despite interviews with all ill crew members and the directors of each department, the type and source of the disease remained unclear. While the epidemic curve appeared to indicate spread of disease primarily through passengers it also demonstrated an increasing incidence of illness amongst crew approximately 1 to 2 days after the initial passenger cases reported onset of symptoms. The later occurrence of illness among the crew indicated either that a contaminated food item was consumed by both groups or a person-to-person spread of disease. Given the predominance of viral gastroenteric illness on cruise ships at that time, the possibility of a viral etiology could not be excluded.

Two surveys were developed with these hypotheses in mind. Investigators developed a passenger survey asking about a guest's choice of ship dining locations, behavioral characteristics, and environmental exposures. Investigators decided that a case-control study was appropriate in the interest of expediency and efficacy. Thirty ill passengers were selected from the GI illness log according to their time of symptom onset. Controls were selected by assigning numbers to passengers who did not report any GI illness to the ship's infirmary. A non-replacement random number generator from Microsoft (MS) Excel was used to generate 60 numbers from the passenger list. The passenger survey was distributed to the first 30 ill passengers and to the 60 randomly selected passengers on March 4, 2006 (Appendix D). One extra survey was given to the cabin mate of a previously selected control, resulting in the distribution of 91 surveys.

Passengers were asked to provide demographic information, symptom profiles, history of exposure to sick people, illness reporting methods, and exposure to dining locations. Passengers were asked to return the survey to the reception desk on the ship. Investigators also designed, distributed, and collected a crew survey (Appendix E). A list of crew members who reported to the infirmary during that cruise was obtained along with a list of the entire staff of the ship, listed by department. Sick persons were removed from the staff list and every person in each department was assigned a number. Three crew members were selected from the same department as an ill crew member. The numbers were generated using the non-replacement random number generator in MS Excel.

The crew survey asked similar questions to those in the passenger survey, but also asked about jobs performed while on the ship. This survey was distributed to all crew members who reported to the ship's infirmary during that cruise at the time of distribution (17 persons) as well as the selected non-reporting crew members (51 persons) on March 4, 2006. A draft of the crew survey was mistakenly sent to the ship prior to finalization and was filled out by all ill crew members. Fortunately the final crew survey only differed in one question when compared to the draft crew survey and this question was excluded from analysis. Sick passengers or crew were asked to have a well person return the survey for them to avoid breaking isolation. Determination of a case was made after reviewing these surveys.

<u>Case definition</u> For this investigation, a case was defined as a person aboard the *MS Explorer of the Seas* who reported at least one of the following between the dates of February 26, 2006, and March 5, 2006:

- three or more loose stools in a 24-hour period
- three or more vomiting episodes in a 24-hour period
- at least one episode each of loose stools and vomiting

Those who reported illness during the cruise but whose symptoms did not meet the case definition and those who reported illness onset prior to embarkation were excluded from further analysis. Well persons (controls) were defined as passengers and crew members who did not report any signs or symptoms of illness. Surveys were entered into a MS Access 2003 database and analyzed using Epi-Info version 3.3.2.

### **Results**

<u>Interviews</u> Initial interviews with RCI's public health assurance manager, ship hotel director, and the ship's physician provided no information that would have indicated the specific means of spread or etiologic agent of the illness. The hotel manager stated that the ship encountered rough seas on the first day of the voyage. Staff stated that a sign was posted at the embarkation terminal asking passengers to report if they had experienced GI illness recently. Staff also stated that no medical personnel were present at the terminal to screen passengers for GI illness during embarkation or disembarkation.

Affected persons appeared to have had a rapid onset of either vomiting or diarrhea, short duration of symptoms, and a self-limited illness. In total, 250 passengers and 20 crew reported to the infirmary. Out of all 270 cases, 4 (1.5% of total) fevers (a temperature >100.3°F) and 1 (0.4% of total) bloody stool were reported. Initial cases were primarily passengers, with an increasing number of crew members becoming ill with time. The peak in crew cases occurred approximately 48 hours after the peak in passenger cases. The number of crew member cases increased as the number of passenger cases decreased.

Fourteen of the 20 crew members that reported to the infirmary were present on the ship at the time of interview; the others had disembarked earlier that morning. Four dining room servers or food managers, each of whom worked in a separate dining room from the others were interviewed. Onset dates ranged from February 28 through March 3, 2006. Those with the earliest onset denied having contact with sick passengers, cabin mates, or workmates. Some of these crew members worked temporarily as room service attendants but recalled the exact cabin numbers of rooms they visited, none of which were listed on the ship's GI illness log. These crew members sometimes ate meals in the staff mess, but often ate while on break at their respective dining rooms.

Six interviewed crew members had high passenger contact positions, but none of them worked in the same department or location. All six of these people had onset dates between March 1 and March 3, 2006. Most of these crew members also had contact with crew members as well as passengers that had been sick before or were presently sick. None of these six crew members shared a common dining location or had sick cabin mates. Two of these crew members reported feeling mildly nauseated one to two days earlier than their stated onset date. These crew members felt this nausea to be mild and transient and did not report to the infirmary until later.

The four remaining crew members were all in the housekeeping or maintenance department. Two of the four were members of the ship's team that cleaned cabins where passengers were sick with GI illness. All crew members in this group had onset after the main contingent of passengers became ill (March 1st and subsequently).

Several crew members stated that they were forced to report to work despite their listed isolated status on the GI illness log. Those who objected were reprimanded or told that this was normal practice. Neither the ship's physician nor the hotel director was aware of this practice. All crew members reported to the ship's infirmary immediately upon feeling strongly nauseated, vomiting, or having experienced an episode of diarrhea.

## Focused environmental inspection findings

- The cabins on the vomit response list did not always match the cabins on the sick cabin list.
- When interviewing the cabin attendants, the verbal list of sick cabins did not match the list of ill cabins from the executive housekeeper. In addition, it was not clear that the cabin attendants understood the company policy of identifying sick cabins as such until the conclusion of the cruise.
- Refills of Mikrobac did not always come from a centralized disinfectant distribution station, although this was stated to be company policy.
- A spray bottle in SLKR 9739 was labeled "1000 ppm Chlorine," but contained a cleanser instead.
- Several of the sinks intended as hand washing sinks for cabin attendants in the housekeeping lockers were used to store items or access to them was partially blocked by items stored around them
- A crew member was seen carrying a red bag with used rags to the centralized disinfectant distribution station on deck 0. This bag was supposed to go to the garbage room for incineration.
- A large sprayer labeled 50 ppm was used for a 1000 ppm chlorine solution. The sprayer was a shoulder harness type container used for disinfecting potable water tanks.
- Yellow cloth bags were transported to the main laundry area under red cloth bags on the same trolley. The red cloth bags are used routinely on this vessel for dirty linens. The yellow bags were used during this outbreak to transport linens from sick cabins.
- The standardized gastrointestinal illness log and the vessel's isolation log did not always indicate crew positions.
- The length of isolation in the crew members' patient records did not always match the length of isolation on the vessel's isolation log. According to the ship's doctor, in cases of discrepancy, the patient's medical record was considered the correct record. Given this, isolation periods were noted to be correct.
- During the day of the outbreak, a food service employee returned for evaluation. This individual had experienced his last symptom the day before. A review of the patient's record revealed that this crew member was deemed fit for duty. This was less than the 48 hours required for isolation of a food employee. An interview with the doctor showed he had erroneously released this individual from isolation.
- Hand washing stations in the garbage rooms and laundry were not adequately stocked. These stations did not have signs advising frequent hand washing.

- The service in the Windjammer dining area was no longer self-service at the time of this investigation. It was noted that some condiments and individually packaged crackers were available for self-service. Bowls and plates at the dessert station were available for self-service.
- Roast beef and chicken were prepared for service to the guests. This food was properly prepared in different galleys. When it was determined that the food would not be served to guests, it was properly stored in a central facility. This same food was later served to the crew. It was not clear in which galley the food had been prepared before service.
- Around 3:00 PM on the day of the investigation large stock pots with white sauce and gravies were noted to be covered with plastic wrap and stored on a shelf under a preparation table in the sauce area. These pots contained potentially hazardous foods that had been removed from cooking around 12:30 PM. According to the crew members in this area, these items were to be used for the evening meal service around 6:30 PM. The white sauce was tested at 120°F. The other sauces were above 140°F. In addition, the top of the preparation counter had a large amount of pooled water. According to the crew members in this area, the table was being cleaned. In addition to the stock pots of food, clean equipment was stored on the shelf under the preparation table. A stock pot of gravy was noted to have a small puddle of water on top of the plastic film covering the pot.
- Roasted pepper sauce in a tilt pan in the sauce area was tested at 124°F. The tilt pan was not on at the time the sauce was tested.
- Crew members normally assigned as wait staff were plating food for service to passengers while wearing watches during this outbreak.

## Laboratory specimens collected

Twelve stool specimens were collected from passengers. All testing was performed at UA laboratories, a contract lab for RCI. Three of the eight stool specimens tested positive for norovirus. According to UA reports, "Two different samplings for enteric pathogens were negative."

## Analysis of the survey

- 91 Passenger surveys distributed;
- 91 Passenger surveys collected (response rate = 100%);
- 8 Passenger surveys were incomplete
  - o incomplete surveys were defined as those lacking sufficient information to determine whether the respondent was a case, control, or had been ill before boarding the ship;
- 5 Passenger surveys indicated the respondent was ill before boarding;
- 5 Passenger surveys indicated indeterminate illness
  - o these respondents noted some symptoms but did not meet the case definition.
- 46 Passenger surveys met the case definition
- 71 Crew surveys distributed
- 71 Crew surveys collected (response rate = 100%)
- 1 Crew survey was incomplete
- 6 Crew surveys indicated indeterminate illness
- 16 Crew surveys met the case definition

The final GI illness log shows that the overall attack rate was 7.8% (252/3245) among the passengers and 1.7% (20/1183) among the crew.

## Passenger Survey.

Appendix F provides a detailed analysis of each variable. Only the pertinent results are described here. Forty-six cases were compared with 73 controls. Five persons indicating that they were ill prior to embarkation and were excluded from the case-control study, a comparison to passenger cases is shown in Appendix G. The median age for cases was 45 (range, 7–80); the median age for controls was 43 (range, 17–68). There were no statistically significant differences between cases and controls with regard to age, sex, or number of cabin mates. The symptom profile is shown in Table 1.

Fifteen cases (37.5%) reported having a sick cabin mate while no controls did. Seventeen (42.5%) cases reported a sick social contact while only four (12.9%) controls did (OR 5.0; 95% CI, 1.5–16.9). On February 28, 10 cases (40%) reported ordering room service for breakfast while only 3 (21%) controls did so (OR 5.56; 95% CI, 1.32–23.46)). No other significant differences were seen between cases and controls with respect to dining location. In addition, no significant differences were found between the two groups with respect to the use of the casino, bar, unbottled water, bottled water, or consumption of drinks containing ice.

Cases differed significantly vs. controls in their knowledge of hand sanitizer presence before the outbreak, even when accounting for the non-normal distribution (Students t statistic 3.64, P < 0.001; Mann-Whitney/Wilcoxon 1-tailed  $\chi^2 = 9.2424$ , P = 0.002). There were no significant differences between the two groups in knowledge about sanitizer presence after the outbreak, hand sanitizer use before or after the outbreak, nor belief in hand sanitizer efficacy against viruses or bacteria that can cause vomiting or diarrhea.

Table 1. Responses from the Passenger Survey.

<b>Symptom profile</b> (percentage of people answering yes vs. all responders)								
Diarrhea Vomiting Nausea Stomach cramps Headache Muscle ache Fever Blood in stool	36 (95%) 32 (84%) 33 (80%) 24 (60%) 21 (52%) 20 (50%) 17 (42%) 1 (3%)							
Median vomiting episodes								
Median Range	4 1–10							
Median diarrhea episodes								
Median Range	6.5 1–10							
Symptom onset								
2/26 2/27 2/28 3/1 3/2 3/3	4 (10%) 19 (49%) 10 (26%) 4 (10%) 1 (3%) 1 (3%)							
Illness duration								
1 day 2 days 3 days 4+ days Still ill	9 (22%) 15 (37%) 11 (27%) 4 (10%) 2 (5%)							

## Crew Survey.

A detailed analysis of each variable is available in Appendix H, only the relevant results are described here. Sixteen cases were compared to 48 controls. The median age for cases was 32 (range, 22–43), for controls it was 30 (range, 20–62). There were no statistically significant differences between cases and controls in regards to age or sex. The symptom profile is shown in Table 2.

**Table 2. Responses from the Crew Survey.** 

<b>Symptom profile</b> (percentage of people answering yes vs. all respondents)									
Diarrhea Stomach cramps Vomiting Nausea Muscle ache Headache Fever Blood in stool	13 (100%) 11 (69%) 7 (64%) 7 (47%) 6 (43%) 4 (29%) 4 (27%) 0								
Median vomiting episodes									
Median Range	4 1–10								
Median diarrhea episodes									
Median Range	6.5 1–10								
Symptom onset									
2/26 2/27 2/28 3/1 3/2 3/3	4 (10%) 19 (49%) 10 (26%) 4 (10%) 1 (3%)								
Illness duration									
1 day 2 days 3 days Still ill	9 (56%) 3 (19%) 1 (6%) 3 (19%)								

No differences were seen between cases and controls with respect to having a sick cabin mate, working with a sick crew member, or being exposed to another person's body fluids. Cases were more likely to have been in contact with a sick passenger or crew member versus controls (OR 5.0; 95% CI, 1.5 – 16.9). Three (50% of respondents) crew cases ate breakfast in the Windjammer on February 28 vs. 2 (7% of respondents) (OR 14.0; 95% CI, 1.6–120.0). Three cases (60% of respondents) ate breakfast in the Windjammer on March 1 compared with 1 (3% of respondents) control. (OR 46.5; 95% CI, 3.2–676.2; Fischer exact test, *P* <0.005). No other significant differences in dining location were noted for crew cases or controls. No statistically significant differences existed between the two groups regarding consumption of unbottled water, bottled water, or drinks containing ice. In addition, no differences were seen in casino or bar use.

### Spatial analysis:

No specific clustering of cases over time was noted.

### **Discussion**

This investigation describes the characteristics of an outbreak of gastroenteritis aboard the *MS Explorer of the Seas* sailing round-trip from Miami, Florida to multiple Mexican and Caribbean ports between February 26 and March 5, 2006. The causative agent of this outbreak appears to be norovirus, demonstrated through laboratory analysis and epidemiologic characteristics. Findings of the investigation are discussed regarding outbreak characteristics, analysis of the surveys, and validity of the data.

Initial reports to VSP indicated an outbreak pattern consistent with either a food-borne toxin/microbe or pre-existing illness that spread quickly. Both guests and crew were exposed to some of the same food items, but the lack of common dining locations among ill crew members argues against a common food item being the culprit. Guest cases used room service for breakfast on February 28 significantly more than controls. This finding is likely due to a number of them being confined in their rooms versus implicating any food item. Beyond the difference seen on February 28, the passenger survey analysis does not indicate any specific difference in dining locations between cases and controls. It is likely that people who were ill before boarding propagated the disease through person-to-person contact. Having a sick cabin mate or social contact was far more common among cases than controls for both guests and crew, which is characteristic of norovirus outbreaks. The 48 hour incubation period between passenger and crew illness peaks is also indicative of norovirus.

The data sheet from the manufacturer of the hand sanitizer used by RCI indicates it is 99.8% effective against bacteria and 90.5% effective against gastroenteritis-causing virus particles after 1 minute of contact. Passengers said they believed that this sanitizer was 60%–70% effective against bacteria and 50%–70% effective against virus particles. There was no difference between cases and controls regarding their knowledge about efficacy.

The operational policy of RCI states that four hand sanitizer stations were present in both public and crew areas during normal operations. Any indication of an abnormal increase in the number of gastroenteritis cases calls for deployment of four additional stations. When compared to controls, cases did not believe that hand sanitizer was present prior to the outbreak. This indicates that education regarding sanitizer location could help prevent future outbreaks.

Neither the passenger nor crew survey demonstrated any difference in demographic profiles when comparing cases with controls, adding validity to the findings. The passenger survey appears to be sufficiently large to detect differences between cases and controls; this is demonstrated by the relatively small confidence intervals. The sample size of the crew survey was often too small to accurately detect differences between cases and controls, as reflected in the large confidence intervals. Because of this, many of the positive crew results were likely false positives. A larger study would be needed to determine if this were the case.

### Recommendations

- Ensure that all staff understand the necessity of adhering to isolation procedures for sick crew members.
- Make a concerted effort to screen passengers for GI illness before they board the ship. The current
  placement of a sign advising passengers to report illness while waiting to board the ship is a passive
  system with variable efficacy.
- Trained personnel should be present at the dock to screen passengers. In addition positive alternatives
  should be offered to those reporting, these alternatives should include members of their traveling party.
  It may be possible to enhance passenger and crew adherence to isolation procedures through the use of
  discounted room service and other incentives.
- Try demonstrating hand sanitization station locations to passengers through videos, tours, and ship announcements during embarkation day. Distribution of individual units of hand sanitizer may also facilitate use and decrease passenger contact with the hand-sanitizer station dispensers
- Encourage both passengers and crew with diarrhea to immediately report to the infirmary. Obtain, label, and immediately refrigerate stool samples from all passengers and crew presenting with diarrhea.

- Ensure that the medical staff evaluate the occupants of all cabins where a vomit response occurs to determine whether the vomiting episode is due to gastrointestinal illness. Any person considered a case should be placed in the GI illness log and the cabin should be added to the sick cabin list.
- Ensure that cabin attendants are given a written list of sick cabins on a daily basis. This list should include all of the sick cabins and not just the additional sick cabins.
- Ensure that cabin attendants are aware of the company policy on outbreak control and management, including how to treat sick cabins.
- Ensure that refill stations other than the centralized disinfectant distribution station are deactivated during outbreaks, as per company policy
- Ensure that working containers are properly labeled as to contents. Improperly labeled containers can contain potentially hazardous chemicals and which can result in injury if mixed with other chemicals or used inappropriately.
- Ensure that hand washing sinks are fully accessible at all times for hand washing. These sinks should be adequately stocked with paper towels and hand cleansers. Signs requiring frequent hand washing would also be beneficial.
- Ensure that red bags carrying potentially infectious waste are carried directly to the garbage room for incineration.
- If the shoulder harness type container for disinfecting potable water tanks is used during outbreaks, containing a different chlorine concentration than would normally be expected, it should be permanently labeled for use only during outbreaks. Ensure that the strength of the chlorine solution marked on the outside of the sprayer matches the contents.
- Transport yellow cloth laundry bags from sick cabins on separate trolleys.
- Ensure that the crew position is noted in both the GI illness log and the vessel isolation log.
- Ensure that the isolation log notes the correct length of isolation.
- Ensure that the correct isolation periods are enforced.
- Ensure that hand washing stations are adequately stocked with soap and paper towels. Signs advising frequent hand washing should be posted at each station.
- Ensure that self-service is discontinued for all foods during an outbreak, including those that are individually packaged.
- Ensure that self-service of plates, bowls, and utensils is discontinued during an outbreak.
- Potentially hazardous hot foods prepared in advance to a meal service should be kept at or above 140°F or should be properly cooled in shallow pans. If these are items are cooled, ensure that the cooling process is logged and monitored.
- Ensure that shelves under counters that are undergoing cleaning are emptied if the cleaning could result in contamination of the items on the shelves.
- Ensure that staff enlisted as food handlers during outbreaks do not wear watches or other jewelry on their wrists or hands. These items are difficult to properly clean and could transmit disease. A plain wedding band is allowed.

The following people worked many long hours under duress to investigate this outbreak. Their work is much appreciated.

Elaine Cramer, MD, MPH CAPT George Vaughan Ms. Lisa Beaumier CDR Julia Chervoni CDR Laura Rabb LTJG Derek Sakris Mr. Manuel Rivas Mr. Richard Pruitt MS Explorer of the Seas staff

## Respectfully,

LT Antonio Neri, M.D. EIS Officer Environmental Health Services Branch Division of Emergency and Environmental Health Services National Center for Environmental Health

## Appendix A

Itinerary for ms Explorer of the Seas — February 26 through March 5, 2006

26 February 2006	Miami, Florida	(Embarkation day)
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27 February 2006 At sea

28 February 2006 Belize City, Belize 1 March 2006 Costa Maya, Mexico 2 March 2006 Cozumel, Mexico

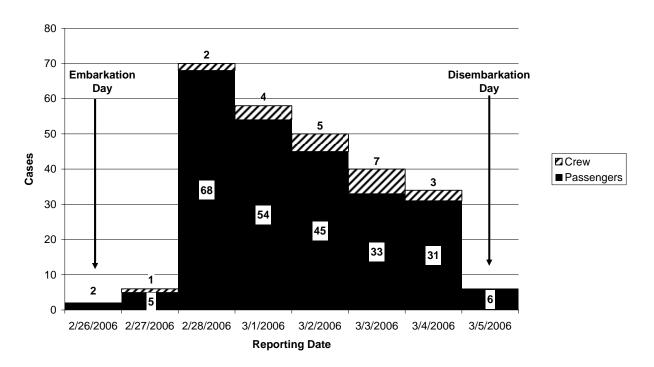
3 March 2006 Grand Cayman, Bahamas

4 March 2006 At sea

5 March 2006 Miami, Florida (Disembarkation day)

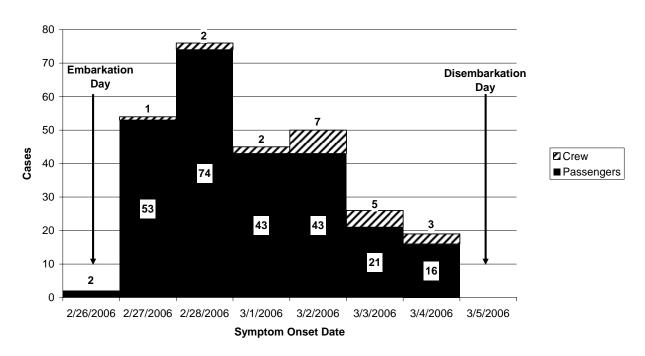
# Appendix B

# MS Explorer of the Seas Acute Gastroenteritis Outbreak Epicurve by Reporting Date $n=272 \label{eq:potential}$



## Appendix C

# MS Explorer of the Seas Acute Gastroenteritis Outbreak Epidemic Curve by Symptom Onset Date $n=272 \label{eq:mseq}$



## Appendix D

CDC ID Number:	
	(CDC use only)



## Guest Questionnaire Explorer of the Seas 26 February to 5 March 2006

Dear Guest:

As you have been advised by the staff of the Explorer of the Seas, there has been more than the expected amount of vomiting and diarrhea on this cruise. The staff of the Vessel Sanitation Program, Centers for Disease Control and Prevention (CDC), in collaboration with Royal Caribbean International, has been investigating the illness in an effort to characterize the nature and extent of the illness aboard the ship, to identify the mode(s) of transmission of disease, and to identify other potential risks associated with illness.

In order to assist with our investigation we ask that **select guests** complete the attached questionnaire. Please return your completed questionnaire to the **Guest Relations Desk**, **Deck 5** as soon as it is completed. If you are still ill, please have someone return the questionnaire for you.

Please use this itinerary to assist you with the completion of this questionnaire.

Day of week	Date	Port/Location
Sunday	26 February 2006	Miami, FL
Monday	27 February 2006	At Sea
Tuesday	28 February 2006	Belize City, Belize
Wednesday	01 March 2006	Costa Maya, Mexico
Thursday	02 March 2006	Cozumel, Mexico
Friday	03 March 2006	Grand Cayman, Bahamas
Saturday	04 March 2006	At Sea
Sunday	05 March 2006	Miami, FL

An investigation summary will be posted to the CDC Vessel Sanitation Program website at: <a href="http://www.cdc.gov/nceh/vsp">http://www.cdc.gov/nceh/vsp</a> once available.

We appreciate your participation.

Sincerely,

CDC Vessel Sanitation Program and Royal Caribbean International

### \*PROTECTION OF PRIVACY INFORMATION

Public Law 93-579 entitled the Privacy Act of 1974 requires that individuals asked to furnish information such as that requested in this form be informed of the purpose for collecting such information and what the information will generally be used for. The following information is accordingly provided:

**Authority:** The Centers for Disease Control and Prevention, and agency of the Department of Health and Human Services, is authorized to solicit the information requested in this form under the authority of the Public Health Service Act, Section 301,361 (42 U.S.C. 241,264).

**Purpose and Uses:** The information requested will be used to implement appropriate control measures if any health problems are identified, and may be shared with federal, state and local health authorities. An accounting of such disclosures will be made available to you upon request.

**Effects of Non-Disclosures:** Your disclosure of the requested information is voluntary, and no penalty will be imposed if you choose not to respond. However, if you do not fill out the questionnaire, it will be more difficult for us to determine the health status of the persons on this cruise.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL AND PREVENTION

CENTERS FOR DISEASE CONTROL AND PREVENTION
ATLANTA, GEORGIA 30333

Public reporting burden of this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to PHS Reports Clearance Officer: ATTN:PRA;Hubert H. Humphrey Bldg., Room. 721-B; 200 Independence Ave., SW; Washington, DC 20201, and to the Office of Management and Budget; Paperwork Reduction Project (0920-0008); Washington, DC 20503.

# I. Personal Data

1. Cabin number:		2.	Total	numl	ber of	people i	in your (	cabin (i	ncludir	ig yours	elf):	
3. Age (in years)	_	4. \$	Sex (C	Zircl€	e one)	Male	F	Female				
			II.	Me	dical	Inform	nation					
5. Were you ill with vomiti	ng or dia	rrhea	in th	e 7 d	avs pr	ior to th	e start o	of the cr	uise?	Yes	No	
Please circle Yes or No for I										uring th	is cruise:	
If Yes for Vomiting or Diar												
6. Vomiting	Yes	No	<u>If</u>	yes :	maxin	num#o	f episod	les in 24	4 hours	1234	5 6 7 8 9 10+	
7. Diarrhea	Yes	No									5 6 7 8 9 10+	
If you were ill with	diarrhea	are y	ou sti	ill cu	rrently	ill with	diarrhe	ea?	Yes	No	N/A	
8. Fever	Yes	No										
9. Stomach cramps	Yes	No										
10. Blood in your stool	Yes	No										
11. Headache	Yes	No										
12. Nausea	Yes	No										
13. Muscle aches	Yes	No										
14. If you were ill with von			hea w	hat d	lav and	d time d	id it staı	rt?				
15. If ill how many days we												
1 2 3 4+	I am s				I was	s not ill	betweer	1 2/26 a	nd now	7		
16. Were any of your cabin					Yes			date of				
17. Were you exposed to an							11 9 00	Yes	No			
If Yes where/When	-	15011	5 (011	111 01	alaili	ica.		1 05	110			
18. Were any of the people		om v	011 W£	ere sc	ocial d	uring th	e cruise	sick?	Yes	No		
If yes what were the										110		
19. List the cabin numbers			-									
19. Elst the each hamoers	or an pec	pre y				 format	ion					_
26 February 2006 (Sunda	w) I unol	•	111	1.00	Ju IIII	ioi iiiai	1011					
20. Did you eat lunch in the			r on E	Imha	rkatio	n day?	Yes	No	Don	t know		
26 February 2006 (Sunda			I OII L	moa	IKatio	ii uay !	1 65	110	Don	t KIIOW		
20 February 2000 (Sunda 21. Did you eat dinner in th			linina	roor	<b>n</b> ?		Yes	No	Don	t know		
21. Did you eat dinner in the 22. Did you eat dinner in the			_	•			Yes	No		't know		
22. Did you eat dinner in the 23. Did you eat dinner in the	_		_				Yes	No		't know		
24. Did you eat dinner in the			_	100111	1 :		Yes	No		't know		
-												
25. Did you eat dinner in the	-						Yes	No No		t know		
26. Did you eat dinner in the							Yes	No No		't know		
27. Did you order room ser							Yes	No	Don	't know		
27 February 2006 (Monda				9			<b>V</b>	NI.	D	24 1		
28. Did you eat breakfast in							Yes	No		't know		
29. Did you eat breakfast in		-					Yes	No		't know		
30. Did you order room ser			iast?				Yes	No	Don	't know		
27 February 2006 (Monda	• ,			0			<b>3</b> 7	NT	ъ.	. 1		
31. Did you eat lunch in the		_		ι!			Yes	No		't know		
32. Did you eat lunch in the	-		r?				Yes	No	Don	't know		
27 February 2006 (Monda	-		1		0		* 7	N.T.	ъ.	. 1		
33. Did you eat dinner in the			_	•			Yes	No		't know		
34. Did you eat dinner in th	_		_				Yes	No		't know		
35. Did you eat dinner in th			_	room	1?		Yes	No		't know		
36. Did you eat dinner in th	_						Yes	No		't know		
37. Did you eat dinner in th	-						Yes	No		't know		
38. Did you eat dinner in the							Yes	No		't know		
<ol><li>Did you order room ser</li></ol>	vice for o	dinne	r?				Yes	No	Don'	't know		

28 February	2006 (T	`uesday	y) Breal	kfast						
40. Did you ea	at break	fast in	the Main	n dining	g room?	,		Yes	No	Don't know
41. Did you ea	at break	fast in	the Win	djamm	er?			Yes	No	Don't know
42. Did you o	l you order room service for breakfast?								No	Don't know
28 February										
43. Did you ea	•	•	,		om?			Yes	No	Don't know
44. Did you ea				_				Yes	No	Don't know
28 February										
45. Did you ea					ing roor	n?		Yes	No	Don't know
46. Did you ea					_			Yes	No	Don't know
47. Did you ea			_		_			Yes	No	Don't know
48. Did you ea								Yes	No	Don't know
49. Did you ea								Yes	No	Don't know
50. Did you ea					19			Yes	No	Don't know
51. Did you o					1:			Yes	No	Don't know Don't know
31. Dia you o	ruci 100	onn sei v	100 101 0	illilici !				1 65	110	Don't know
52 Circle the	overo co	numh	or of alo	ggag of	TINIDA	TTI E	D ahin'a	xxotor x	vou dra	als nor days
52. Circle the 0 1	average	3	4	5	6	7	Silip s	9	you urai 10+	ik pei day.
-	_	_	=	-			_	-		
53. Circle the	_		er of bot				_	_	-	
0 1	2	3	=	5 CONT	6	7	8	9	10+	
54. Circle the									-	
0 1	2	3	4	5	6	7	8	9	10+	
55 D:1			1		0	<b>X</b> 7	<b>3.</b> T			
55. Did you v			_		se?	Yes	No	2/20		2/1 11 .
•	circle A			2/26		2/27	3.7	2/28		3/1 and later
56. Did you v						Yes	No			
	what ba									
If yes	what bar	rs did y	ou visit	on $2/2$	7 (Mone	day)				
If yes	what ba	rs did y	ou visit	on 2/2	8 (Tues	day)				
	_	_								
		ind san	ıtızer av	aılable	on the s	ship <u>BE</u>	EFORE y	you kne	w that o	others were sick?
Never availab	le									Always Available
0	1	2	3	4	5	6	7	8	9	10
58. How ofter	ı was ha	ınd san	itizer av	ailable	on the s	ship <u>AF</u>	<u>TER</u> yo	u knew	that otl	ners were sick?
Never availab	le									Always Available
0	1	2	3	4	5	6	7		9	10
59. How often	ı did yoı	u use h	and sani	itizer <u>w</u>	hen it w	as avai	ilable Bl	EFORE	you kn	ew that others were sick?
Never										Always
0	1	2	3	4	5	6	7	8	9	10
60. How ofter	ı did yoı	u use h	and sani	itizer w	hen it w	as avai	ilable Al	FTER y	ou knev	w that others were sick?
Never	-							,		Always
0	1	2	3	4	5	6	7	8	9	10
61 How effect	tive do	vou be	lieve ha	nd sani				that ca	n cause	vomiting or diarrhea?
	teria kil				VIZ-01 15 V		0.0000110			, critical or division.
0			30%	/	50%	60%	70%	80%	90%	100%
-										vomiting or diarrhea?
	us killed			iid Suill		~5~1115t	, 11 0000	mat car	· caase	, omnuing or aluminou.
0		20%	/	40%	50%	60%	70%	80%	90%	100%
U	10/0	20/0	20/0	TU / 0	20/0	00/0	/0/0	00/0	JU/0	100/0

63. Additional comments that may help us investigate this outbreak:



## **Crew Questionnaire** Explorer of the Seas 26 February to 5 March 2006

Dear Crew Member:

As you have been advised by the staff of the Explorer of the Seas, there has been more than the expected amount of vomiting and diarrhea on this cruise. The staff of the Vessel Sanitation Program, Centers for Disease Control and Prevention (CDC), in collaboration with Royal Caribbean International, has been investigating the illness in an effort to describe the nature and extent of the illness aboard the ship, to identify how the disease is transmitted, and to identify other potential risks associated with illness.

In order to assist with our investigation we ask that select crew members complete the attached questionnaire. Please return your completed questionnaire to the Guest Relations Desk, Deck 5 as soon as it is completed. Please have someone help to interpret this survey if you do not understand the questions.

Please use this itinerary to assist you with the completion of this questionnaire.

Day of week	Date	Port/Location
Sunday	26 February 2006	Miami, FL
Monday	27 February 2006	At Sea
Tuesday	28 February 2006	Belize City, Belize
Wednesday	01 March 2006	Costa Maya, Mexico
Thursday	02 March 2006	Cozumel, Mexico
Friday	03 March 2006	Grand Cayman, Bahamas
Saturday	04 March 2006	At Sea
Sunday	05 March 2006	Miami, FL

An investigation update will be posted to the CDC Vessel Sanitation Program website at: http://www.cdc.gov/nceh/vsp once available. We appreciate your participation.

Sincerely,

CDC Vessel Sanitation Program and Royal Caribbean International

#### \*PROTECTION OF PRIVACY INFORMATION

Public Law 93-579 entitled the Privacy Act of 1974 requires that individuals asked to furnish information such as that requested in this form be informed of the purpose for collecting such information and what the information will generally be used for. The following information is accordingly provided:

**Authority:** The Centers for Disease Control and Prevention, and agency of the Department of Health and Human Services, is authorized to solicit the information requested in this form under the authority of the Public Health Service Act, Section 301,361 (42 U.S.C. 241,264).

Purpose and Uses: The information requested will be used to implement appropriate control measures if any health problems are identified, and may be shared with federal, state and local health authorities. An accounting of such disclosures will be made available to you upon request.

Effects of Non-Disclosures: Your disclosure of the requested information is voluntary, and no penalty will be imposed if you choose not to respond. However, if you do not fill out the questionnaire, it will be more difficult for us to determine the health status of the persons on this cruise.

### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

PUBLIC HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL AND PREVENTION
ATLANTA, GEORGIA 30333
Public reporting burden of this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to PHS Reports Clearance Officer: ATTN:PRA;Hubert H. Humphrey Bldg., Room. 721-B; 200 Independence Ave., SW; Washington, DC 20201, and to the Office of Management and Budget; Paperwork Reduction Project (0920-0008); Washington, DC 20503.

I. Personal Data

1. Name	2. Cal	oin Nur	nber			
3. Age (years)	4. Sex	4. Sex (Circle one) Male				
II. Medical Info	rmation					
5. Have you been ill with vomiting or diarrhea during this cruis			Don't	Know		
If yes when did your illness start?						
If yes are you still ill?	- Yes	No	Don't	Know		
Please <u>circle Yes or No for EACH</u> of the following symptoms you						
If yes for Vomiting or Diarrhea circle the maximum # of episode						
6. Vomiting Yes No If yes <u>circle</u> the <u>maximum</u>	•		_		567	8 9 10+
7. Diarrhea Yes No If yes <u>circle</u> the <u>maximum</u>						
If you were ill with diarrhea are you still ill with diarrhe						
8. Fever Yes No						
9. Stomach cramps Yes No						
10. Blood in your stool Yes No						
11. Headache Yes No						
12. Nausea Yes No						
13. Muscle aches Yes No						
14. If you were ill how many days were you ill?	I	was no	t ill bety	veen 2/2	6 and r	now
15. Were any of your cabin mates ill?						
(Circle one) Yes No Don't know		If ves	who			
16. Did you come into contact with any passengers or crew wh						the last
10 days? (Circle one) Yes No If yes whe						
17. Were any of the people you work with sick with vomiting of					Yes	No
10 1 1:14 0:		_				
If yes when did the first person get sick?  If yes what was their name?	- What	was th	eir iob?			
18. Please list the cabin numbers of your closest friends			Jee.			
III Food Inform						
25 February 2006 (Saturday) Breakfast	auton					
19. Did you eat breakfast in the Staff mess?	Yes	No	Don't	know		
20. Did you eat breakfast in the Officer's mess?	Yes	No		know		
21. Did you eat breakfast in the Windjammer?	Yes	No		know		
22. Did you eat breakfast in your room?	Yes	No		know		
25 February 2006 (Saturday) Lunch	105	110	Don	, KIIO VV		
23. Did you eat lunch in the Staff mess?	Yes	No	Don't	know		
24. Did you eat lunch in the Officer's mess?	Yes	No		know		
25. Did you eat lunch in the Windjammer?	Yes	No		know		
26. Did you eat lunch in your room?	Yes	No		know		
25 February 2006 (Saturday) Dinner	105	110	Don	. KIIO W		
27. Did you eat dinner in the Staff mess?	Yes	No	Don't	know		
28. Did you eat dinner in the Officer's mess?	Yes	No		know		
29. Did you eat dinner in the Windjammer?	Yes	No		know		
30. Did you eat dinner in your room?	Yes	No		know		
26 February 2006 (Sunday) Breakfast	1 03	110	Don	KIIOW		
31. Did you eat breakfast in the Staff mess?	Yes	No	Don't	know		
32. Did you eat breakfast in the Officer's mess?	Yes	No		know		
33. Did you eat breakfast in the Windjammer?	Yes	No		know		
34. Did you eat breakfast in your room?	Yes	No		know		
57. Did you cat of carrast in your room!	1 65	TNO	ווטע	MULKI		

26 February 2006 (Sunday) Lunch			
35. Did you eat lunch in the Staff mess?	Yes	No	Don't know
36. Did you eat lunch in the Officer's mess?	Yes	No	Don't know
37. Did you eat lunch in the Windjammer?	Yes	No	Don't know
38. Did you eat lunch in your room?	Yes	No	Don't know
26 February 2006 (Sunday) Dinner			
39. Did you eat dinner in the Staff mess?	Yes	No	Don't know
40. Did you eat dinner in the Officer's mess?	Yes	No	Don't know
41. Did you eat dinner in the Windjammer?	Yes	No	Don't know
42. Did you eat dinner in your room?	Yes	No	Don't know
27 February 2006 (Monday) Breakfast			
43. Did you eat breakfast in the Staff mess?	Yes	No	Don't know
44. Did you eat breakfast in the Officer's mess?	Yes	No	Don't know
45. Did you eat breakfast in the Windjammer?	Yes	No	Don't know
46. Did you eat breakfast in your room?	Yes	No	Don't know
27 February 2006 (Monday) Lunch			
47. Did you eat lunch in the Staff mess?	Yes	No	Don't know
48. Did you eat lunch in the Officer's mess?	Yes	No	Don't know
49. Did you eat lunch in the Windjammer?	Yes	No	Don't know
50. Did you eat lunch in your room?	Yes	No	Don't know
27 February 2006 (Monday) Dinner			
51. Did you eat dinner in the Staff mess?	Yes	No	Don't know
52. Did you eat dinner in the Officer's mess?	Yes	No	Don't know
53. Did you eat dinner in the Windjammer?	Yes	No	Don't know
54. Did you eat dinner in your room?	Yes	No	Don't know
28 February 2006 (Tuesday) Breakfast			
55. Did you eat breakfast in the Staff mess?	Yes	No	Don't know
56. Did you eat breakfast in the Officer's mess?	Yes	No	Don't know
57. Did you eat breakfast in the Windjammer?	Yes	No	Don't know
58. Did you eat breakfast in your room?	Yes	No	Don't know
28 February 2006 (Tuesday) Lunch			
59. Did you eat lunch in the Staff mess?	Yes	No	Don't know
60. Did you eat lunch in the Officer's mess?	Yes	No	Don't know
61. Did you eat lunch in the Windjammer?	Yes	No	Don't know
62. Did you eat lunch in your room?	Yes	No	Don't know
28 February 2006 (Tuesday) Dinner	••		<b>.</b>
63. Did you eat dinner in the Staff mess?	Yes	No	Don't know
64. Did you eat dinner in the Officer's mess?	Yes	No	Don't know
65. Did you eat dinner in the Windjammer?	Yes	No	Don't know
66. Did you eat dinner in your room?	Yes	No	Don't know
1 March 2006 (Wednesday) Breakfast	<b>3</b> 7	<b>3.</b> T	D 1/1
67. Did you eat breakfast in the Staff mess?	Yes	No	Don't know
68. Did you eat breakfast in the Officer's mess?	Yes	No	Don't know
69. Did you eat breakfast in the Windjammer?	Yes	No	Don't know
70. Did you eat breakfast in your room?	Yes	No	Don't know
1 March 2006 (Wednesday) Lunch	<b>3</b> 7	NT	D 2/1
71. Did you eat lunch in the Staff mess?	Yes	No No	Don't know
72. Did you eat lunch in the Officer's mess?	Yes	No No	Don't know
73. Did you eat lunch in the Windjammer?	Yes	No No	Don't know
74. Did you eat lunch in your room?	Yes	No	Don't know

you e	at dinne	r in the	Staff r	ness?				Yes	No	Don't know	W		
you e	at dinne	r in the	Office	r's mes	s?			Yes	No	Don't know	W		
you e	at dinne	r in the	Windj	ammer?	)			Yes	No	Don't know	W		
you e	at dinne	r in yo	ur roon	1?				Yes	No	Don't know	W		
cle the	average	e numb	er of gl	asses of	UNBO	TTLED	ship's	water	you drai	nk per day:			
0	1	2	3	4	5	6	7	8	9	10+			
cle the	average	e numb	er of bo	ottles of	BOTT	L <b>ED</b> wa	ter you	drank 1	per day:				
0	1	2	3	4	5	6	7	8	9	10+			
cle the	number	of bev	erages	CONT	AININ	G ICE f	rom the	ship p	er day:				
0	1	2	3	4	5	6	7	8	9	10+			
you <b>v</b>	isit or v	<b>vork</b> ir	the car	sino in t	he last 1	10 days?			Yes	No			
If yes	circle A	LL dat	tes	2/23	2/24	2/25	2/26	2/27	2/28	3/1			
you <b>v</b>	isit or v	<b>vork</b> ir	any ba	ars <u>on th</u>	e ship i	n the las	t 10 da	ys?		Ye	S	No	
If yes	what ba	rs did	you vis	it <u>or wo</u> i	rk at on	2/23 (TI	hursday	· ')					
If yes	what ba	rs did	you visi	it <u>or wo</u>	<u>rk</u> at on	2/24 (Fr	riday) _						
If yes	what ba	rs did	you vis	it <u>or wo</u>	<u>rk</u> at on	2/25 (Sa	aturday	)					
If yes	what ba	rs did	you vis	it <u>or wo</u> i	<u>rk</u> at on	2/26 (St	ınday)						
If yes	what ba	rs did	you vis	it <u>or wo</u> i	<u>rk</u> at on	2/27 (M	(onday						
If yes	what ba	rs did	you vis	it <u>or wo</u> i	<u>rk</u> at on	2/28 (Tu	uesday)						
If yes	what ba	rs did	you vis	it <u>or wo</u>	rk at on	3/1 (We	dnesda	y)					_
-					ip?					Ye	S	No	
If yes	how oft	en? (C	ircle on	e)									
< 1 pe	r week		2 - 3	x per w	eek	Once p	er day		Many	times durin	g tł	he day	
ditiona	l comm	ents th	at may	help us	investig	ate this	illness:						
	you en you velle the O elle the O el	you eat dinner you visit or you you what bat If yes how oft < 1 per week	you eat dinner in the you eat dinner in you ele the average numb 0 1 2  ele the average numb 0 1 2  ele the number of bever 0 1 2  you visit or work in If yes circle ALL date you visit or work in If yes what bars did you wish the yes what bars did you use the hand san If yes how often? (C < 1 per week	you eat dinner in the Staff region and the Office you eat dinner in the Windje you eat dinner in your room the the average number of glough of the average number of both the case of the average number of both the case of the average number of beverages of the a	ele the average number of glasses of 0 1 2 3 4  The cle the average number of bottles of 0 1 2 3 4  The cle the number of beverages CONT 1 2 3 4  The cle the number of beverages CONT 2 3 4  The cle the number of beverages CONT 2 3 4  The cle the number of beverages CONT 2 3 4  The cle the number of beverages CONT 2 3 4  The cle the number of beverages CONT 2 3 4  The cle the number of beverages CONT 2 3 4  The cle the number of beverages CONT 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of bottles of 2 3 4  The cle the average number of glasses of 2 3 4  The cle the average number of glasses of 2 3 4  The cle the average number of bottles of 2 3 4  The cle	you eat dinner in the Staff mess?  you eat dinner in the Officer's mess?  you eat dinner in the Windjammer?  you eat dinner in your room?  cle the average number of glasses of UNBO  0 1 2 3 4 5  cle the average number of bottles of BOTTI  0 1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the number of beverages CONTAINING  1 2 3 4 5  cle the average number of bottles of BOTTI  1 2 3 4 5  cle the average number of bottles of BOTTI  1 2 3 4 5  cle the average number of bottles of BOTTI  1 2 3 4 5  cle the average number of glasses of UNBO  1 2 3 4 5  cle the average number of glasses of UNBO  1 2 3 4 5  cle the average number of glasses of UNBO  1 2 3 4 5  cle the average number of bottles of BOTTI  1 2 3 4 5  cle the average number of bottles of BOTTI  2 3 4 5  cle the average number of bottles of BOTTI  2 3 4 5  cle the average number of bottles of BOTTI  2 3 4 5  cle the average number of bottles of BOTTI  3 4 5  cle the average number of bottles of BOTTI  4 5  cle the average number of bottles of BOTTI  1 2 3 4 5  cle the average number of bottles of BOTTI  2 3 4 5  cle the average number of bottles of BOTTI  3 4 5  cle the average number of bottles of BOTTI  4 5  cle the average number of bottles of BOTTI  5 4 5  cle the average number of bottles of BOTTI  6 1 2 3 4 5  cle the average number of bottles of BOTTI  6 2 3 4 5  cle the average number of bottles of BOTTI  6 2 3 4 5  cle the average number of bottles of BOTTI  6 2 4 5  cle the average number of bottles of BOTTI  6 2 4 5  cle the average number of bottles of BOTTI  6 2 4 5  cle the average number of bottles of BOTTI  6 2 4 5  cle the average number of bottles of BOTTI  6 2 5 4  cle	you eat dinner in the Staff mess? you eat dinner in the Officer's mess? you eat dinner in the Windjammer? you eat dinner in your room?  Cle the average number of glasses of UNBOTTLED  O 1 2 3 4 5 6  Cle the average number of bottles of BOTTLED was  O 1 2 3 4 5 6  Cle the number of beverages CONTAINING ICE for the number of beverages CONTAINING ICE for the properties of	you eat dinner in the Staff mess? you eat dinner in the Officer's mess? you eat dinner in the Windjammer? you eat dinner in your room?  Cle the average number of glasses of UNBOTTLED ship's to a shi	you eat dinner in the Staff mess?  you eat dinner in the Officer's mess?  you eat dinner in the Windjammer?  you eat dinner in your room?  Yes  you eat dinner in the Windjammer?  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Ye	you eat dinner in the Staff mess?  you eat dinner in the Officer's mess?  you eat dinner in the Windjammer?  you eat dinner in your room?  Yes No you eat dinner in your room?  Yes No Yes No you eat dinner in your room?  Yes No Yes No Yes No Yes No Yes No Cle the average number of glasses of UNBOTTLED ship's water you drank 0 1 2 3 4 5 6 7 8 9  Cle the average number of bottles of BOTTLED water you drank per day: 0 1 2 3 4 5 6 7 8 9  Cle the number of beverages CONTAINING ICE from the ship per day: 0 1 2 3 4 5 6 7 8 9  Yes If you visit or work in the casino in the last 10 days?  If yes what bars did you visit or work at on 2/24 (Friday)  If yes what bars did you visit or work at on 2/25 (Saturday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/27 (Monday)  If yes what bars did you visit or work at on 2/28 (Tuesday)  If yes what bars did you visit or work at on 2/28 (Tuesday)  If yes what bars did you visit or work at on 2/28 (Tuesday)  If yes what bars did you visit or work at on 2/28 (Tuesday)  If yes what bars did you visit or work at on 2/28 (Tuesday)  If yes what bars did you visit or work at on 3/1 (Wednesday)  If yes what bars did you visit or work at on 3/1 (Wednesday)  If yes how often? (Circle one)  < 1 per week 2 - 3 x per week Once per day Many	you eat dinner in the Staff mess?  you eat dinner in the Officer's mess?  you eat dinner in the Officer's mess?  you eat dinner in the Windjammer?  you eat dinner in your room?  Yes No Don't kno you eat dinner in your room?  Yes No Don't kno Don't kno Yes No Don't kno you eat dinner in your room?  Yes No Don't kno Don't kno Yes No Don't kno No Don't kno Yes No Don't kno Don	you eat dinner in the Staff mess?  you eat dinner in the Officer's mess?  you eat dinner in the Officer's mess?  you eat dinner in the Windjammer?  you eat dinner in the Windjammer?  you eat dinner in your room?  Yes No Don't know Don't know Yes No Don't know Yes	you eat dinner in the Staff mess?  you eat dinner in the Officer's mess?  you eat dinner in the Windjammer?  you eat dinner in the Windjammer?  Yes No Don't know  you eat dinner in the Windjammer?  Yes No Don't know  Yes No In yes No Don't know  Yes No In yes No In yes No In yes what bars did you visit or work at on 2/25 (Saturday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/26 (Sunday)  If yes what bars did you visit or work at on 2/

# Appendix F

Passenger survey analysis

Variable		assenger sur		trols	Significance and		
Variable		= <b>46</b>		: <b>73</b>	CI		
		existing illness)	<b></b>	- 70			
Age	Mean	43.0	Mean	41.6	Students t test		
	Median	45	Median	43	T Stat $= 0.45$		
	Range	7 - 80	Range	17–68	P Value = 0.66		
Sex	Female	17 (42.5 %)	Female	15 (51.7 %)	1.28 (0.50–3.26)		
	Male	23 (57.5 %)	Male	14 (48.3 %)	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (		
Number of	Median	2	Median	2			
people in cabin	Range	$\frac{1}{1-3}$	Range	$\frac{1}{1} - 3$			
Number ill	5	-	8-	-			
prior to cruise							
Symptom	Diarrhea	36 (95%)					
profile	Vomiting	32 (84%)					
prome	Nausea	33 (80%)					
(Note: %'s are % of	Stomach	24 (60%)					
people responding	cramps	21 (0070)					
yes versus all	Headache	21 (52%)					
responding)	Muscle ache	20 (50%)					
	Fever	17 (42%)					
	Blood in	1 (3%)					
	stool	1 (370)					
Median	Median	4					
vomiting	Range	$\begin{vmatrix} 4 \\ 1 - 10 \end{vmatrix}$					
episodes	Kange	1 – 10					
Median	Median	6.5					
diarrheal	Range	1 - 10					
episodes	Kange	1 – 10					
_	2/26	4 (100/)					
Symptom onset	2/26	4 (10%)					
	2/27	19 (49%)					
	2/28	10 (26%)					
	3/1	4 (10%)					
	3/2	1 (3%)					
TII	3/3	1 (3%)					
Illness duration	1 day	9 (22%)					
	2 days	15 (37%)					
	3 days	11 (27%)					
	4+ days	4 (10%)					
	Still ill	2 (5%)	0 (00()		27/4		
Number	15 (37.5%)		0 (0%)		N/A		
sharing cabin							
with ill person							

Number	2 (5.1%)		1 (3.3%)		NA
	2 (3.170)		1 (3.570)		IVA
exposed to another					
persons vomit					
or diarrhea	15 (12 50()				50(15, 160)
Number with a	17 (42.5%)		4 (12.9%)		5.0 (1.5 – 16.9) †
sick social					
contact					
% eating lunch	35 (85.4%)		25 (78.1%)		
on 2/26 in					
Windjammer					
Locations					
people ate on					
the following					
dates:					
2/26 Dinner	Windjammer	4 (10%)	Windjammer	9 (24%)	0.29
	Columbus	13 (33%)	Columbus	5 (13%)	2.70 (0.84 –8.70)
	Magellan	15 (38%)	Magellan	17 (45%)	0.56
	Da Gama	7 (18%)	Da Gama	7 (18%)	0.77
	Chops grill	0	Chops grill	0	
	Portofino grill	0	Portofino grill	0	
	Room service	1 (3%)	Room service	0	
	Any Main	34	Any Main	28	0.91 (0.19–4.41)
2/27 Breakfast	Windjammer	30 (75%)	Windjammer	23 (77%)	0.72
	Main	5 (13%)	Main	2 (17%)	1.91 (0.34–10.65)
	Rm. Svc.	5 (13%)	Rm. Svc.	5 (7%)	0.68
2/27 Lunch	Windjammer	31 (82%)	Windjammer	17 (77%)	1.22 (0.30–4.91)
	Main	7 (18%)	Main	5 (23%)	0.75
	Rm. Svc.	0 `	Rm. Svc.	0 `	
2/27 Dinner	Windjammer	4 (11%)	Windjammer	4 (12%)	0.82
	Columbus	10 (26%)	Columbus	5 (15%)	2.70 (0.84–8.70)
	Magellan	14 (37%)	Magellan	16 (48%)	0.56
	Da Gama	6 (16%)	Da Gama	6 (18%)	0.77
	Chops grill	0	Chops grill	0	
	Portofino grill	1 (3%)	Portofino grill	0	
	Room service	3 (8%)	Room service	2 (6%)	1.28 (0.20–8.19)
	Any Main	30	Any Main	27	0.63
2/28 Breakfast	Windjammer	12 (48%)	Windjammer	19 (68%)	0.44
	Main	3 (12%)	Main	6 (11%)	0.50
	Rm. Svc.	10 (40%)	Rm. Svc.	3 (21%)	5.56 (1.32–23.46)†
2/28 Lunch	Windjammer	11 (92%)	Windjammer	18 (82%)	2.44 (0.24–24.78)
2/20 Dullell	Main	1 (8%)	Main	4 (18%)	0.41
	Rm. Svc.	0	Rm. Svc.	0	0.71
	KIII. SVC.	U	KIII. SVC.	U	

2/28 Dinner	Windjammer Columbus Magellan Da Gama Chops grill Portofino grill Room service	3 (13%) 3 (13%) 4 (17%) 3 (13%) 0 0 11 (46%)	Windjammer Columbus Magellan Da Gama Chops grill Portofino grill Room service	3 (10%) 5 (17%) 15 (50%) 7 (23%) 0 0	1.35 (0.25–7.40) 0.75 0.20 0.49
	Any Main	10	Any Main	27	0.09
Number of	Mean	2.6	Mean	3.4	Students t test
glasses of	Median	2.0	Median	3.0	T Stat $= 1.60$
unbottled water					P Value = 0.11
consumed					
Number of	Mean	1.3	Mean	1.4	Students t test
glasses of	Median	1.0	Median	1.0	T Stat $= 0.25$
bottled water					P Value = 0.81
consumed					
Number of	Mean	4.6	Mean	5.0	Students t test
drinks	Median	4.0	Median	5.0	T Stat $= 0.59$
<u>containing ice</u>					P Value = 0.56
consumed			21 (550)		0.50.(0.5.1.70)
Use of casino	22 (56% of respon		21 (66% of respondents)		0.68 (0.26–1.78)
Visit bars	15 (39% of respor		16 (53% of resp		0.54 (0.21–1.44)
How often	Mean	0.8	Mean	3.3	Students t test
person believed	Median	0	Median	2.0	T Stat $= 3.64$
hand sanitizer					P Value < 0.001†
was present before knowing others were sick					Mann- Whitney/Wilcoxon $\chi^2 = 9.2424$ P Value = 0.002 †
How often	Mean	7.8	Mean	8.4	Students t test
person believed	Median	10.0	Median	10.0	T Stat $= 0.8.0$
hand sanitizer					P Value = 0.43
was present after knowing others were sick					
Use of hand	Mean	4.4	Mean	4.8	Students t test
sanitizer <u>before</u>	Median	3.0	Median	4.5	T Stat $= 0.35$
knowing others					P Value = $0.73$
were sick					
Use of hand	Mean	8.9	Mean	8.4	Students t test
sanitizer <u>after</u> knowing others were sick	Median	10.0	Median	10.0	T Stat = 0.80 P Value = 0.43

Efficacy of	Mean	63.9%	Mean	68.3%	Students t test
hand sanitizer	Median	60.0%	Median	70.0%	T Stat $= 0.69$
against bacteria					P Value = $0.49$
Efficacy of	Mean	60.8%	Mean	64.8%	Students t test
hand sanitizer	Median	50.0%	Median	70.0%	T Stat $= 0.64$
against virus					P Value = 0.52

<sup>†</sup> Indicates significant difference at 95% confidence interval

# Appendix G

Passengers with prior illness analysis

Variable	Illness prior to boarding Illness after boar				
Age	Mean	46.0		43.1	
	Median	42	Median	45	
	Range	34 – 62	Range	7 – 80	
Sex	Female	2 (40.0 %)	Female	17 (42.5 %)	
	Male	3 (60.0 %)	Male	23 (57.5 %)	
Number of	Median	2	Median	2	
people in cabin	Range	2-6	Range	1 - 3	
Symptom	Diarrhea	4 (100%)	Diarrhea	36 (95%)	
profile	Vomiting	5 (100%)	Vomiting	32 (84%)	
	Nausea	1 (20%)	Nausea	33 (80%)	
(Note: %'s are % of	Stomach	1 (20%)	Stomach	24 (60%)	
people responding	cramps		cramps		
yes versus all responding)	Headache	1 (20%)	Headache	21 (52%)	
responding)	Muscle ache	0	Muscle ache	20 (50%)	
	Fever	0	Fever	17 (42%)	
	Blood in stool	0	Blood in stool	1 (3%)	
Median	Median	5	Median	4	
vomiting	Range	1 - 10	Range	1 - 10	
episodes					
Median	Median	4	Median	6.5	
diarrheal	Range	2 - 10	Range	1 – 10	
episodes	8-				
Symptom onset	2/24 @ 1420	1 (50%)	2/26	4 (10%)	
	2/27 (a) 0800	1 (50%)	2/27	19 (49%)	
(Note: %'s are % of			2/28	10 (26%)	
people responding			3/1	4 (10%)	
yes versus all			3/2	1 (3%)	
responding)			3/3	1 (3%)	
Illness duration	1 day	2 (40%)	1 day	9 (22%)	
	2 days	0	2 days	15 (37%)	
	3 days	1 (20%)	3 days	11 (27%)	
	4+ days	2 (40%)	4+ days	4 (10%)	
	Still ill	0	Still ill	2 (5%)	
Number	1 (20.0%)	1 ~	15 (37.5%)	2 (2 / 0)	
sharing cabin	1 (20.070)		15 (57.570)		
with ill person					
Number	1 (20.0%)		2 (5.1%)		
exposed to	1 (20.070)		2 (3.170)		
another					
persons vomit					
or diarrhea					

Number with a	3 (60.0%)	17 (42.5%)
sick social		
contact		

# Appendix H

**Crew survey analysis** 

Variable	Cases		Con	trols	Significance and
	n =	: 16	<b>n</b> =	<b>48</b>	CI
Age	Mean	32.1	Mean	32.5	Students t test
	Median	32	Median	30	T Stat $= 0.21$
	Range	22 - 43	Range	20 - 62	P Value = 0.83
Sex	Female $= 6$		Female	17 (62.2 %)	1.01 (0.31 - 3.29)
	(37.5 %)		Male	28 (37.8 %)	
	Male = 10				
	(62.5 %)				
Symptom	Diarrhea	13 (100%)			
profile	Stomach	11 (69%)			
	cramps				
(Note: %'s are % of	Vomiting	7 (64%)			
people responding yes versus all	Nausea	7 (47%)			
responding)	Muscle ache	6 (43%)			
	Headache	4 (29%)			
	Fever	4 (27%)			
	Blood in	0			
	stool				
	2.5.41				
Median	Median	4			
vomiting	Range	1 – 10			
episodes	2.5.11				
Median	Median	6.5			
diarrheal	Range	1 – 10			
episodes	2/2 (	4 (4.00 ()			
Symptom onset	2/26	4 (10%)			
	2/27	19 (49%)			
	2/28	10 (26%)			
	3/1	4 (10%)			
	3/2	1 (3%)			
TII	3/3	1 (3%)			
Illness duration	1 day	9 (56%)			
	2 days	3 (19%)			
	3 days	1 (6%)			
NT	Still ill	3 (19%)	2 (50/)		2.4.(0.4.26.0)
Number	2 (14%)		2 (5%)		3.4 (0.4 - 26.9)
sharing cabin					
with ill person					

Number exposed to another persons vomit or diarrhea	2 (5.1%)		1 (3.3%)		NA	
Number whom had contact with a sick passenger or crew member	4 (25%)		17 (39%)		5.0 (1.5 – 16.9) †	
Number whom worked with a sick crew member	2 (13%)		13 (28%)		(*0.19)	
Locations people ate on the following dates:						
2/25 Breakfast (Fisher Exact Test	Staff mess Officers mess Windjammer	3 (50%) 1 (17%) 2 (33%)	Staff mess Officers mess Windjammer	23 (88%) 5 (19%) 1 (4%)	(* 0.063) (* 0.69) (* 0.083)	
used on values < 5)  2/25 Lunch	Room Staff mess	0 5 (50%)	Room Staff mess	0 24 (67%)	(* 0.27)	
(Fisher Exact Test used on values < 5)	Officers mess Windjammer Room	2 (20%) 3 (30) 0	Officers mess Windjammer Room	13 (36%) 3 (8%) 0	(* 0.29) (* 0.11)	
2/25 Dinner  (Fisher Exact Test used on values < 5)	Staff mess Officers mess Windjammer Room	6 (55%) 2 (18%) 3 (27%)	Staff mess Officers mess Windjammer	26 (72%) 8 (22%) 2 (6%)	(* 0.23) (* 0.57) (* 0.076)	
2/26 Breakfast  (Fisher Exact Test	Staff mess Officers mess Windjammer	1 (9%) 3 (50%) 2 (33%) 1 (17%)	Room Staff mess Officers mess Windjammer	2 (6%) 23 (79%) 5 (17%) 1 (3%)	(* 0.56) (* 0.16) (* 0.34) (* 0.32)	
used on values < 5)  2/26 Lunch	Room Staff mess Officers mess	3 (50%)	Room Staff mess	1 (3%) 23 (72%)	(* 0.83) (* 0.27) (* 0.57)	
(Fisher Exact Test used on values < 5)	Windjammer Room	2 (33%) 1 (17%) 0	Officers mess Windjammer Room	9 (28%) 3 (9%) 0	(* 0.57) (* 0.51)	
2/26 Dinner  (Fisher Exact Test used on values < 5)	Staff mess Officers mess Windjammer Room	8 (67%) 2 (88%) 2 (17%) 1 (8%)	Staff mess Officers mess Windjammer Room	28 (78%) 7 (19%) 2 (6%) 2 (6%)	(* 0.34) (* 0.35) (* 0.26) (* 0.59)	

2/27 Breakfast	Staff mess	4 (67%)	Staff mess	22 (79%)	(* 0.44)
_,_,	Officers mess	0	Officers mess	6 (21%)	(* 0.28)
(Fisher Exact Test	Windjammer	2 (33%)	Windjammer	2 (7%)	(* 0.13)
used on values < 5)	Room	0	Room	0	( 0.15)
2/27 Lunch	Staff mess	6 (55%)	Staff mess	27 (71%)	(* 0.25)
_,_,	Officers mess	1 (9%)	Officers mess	11 (29%)	(* 0.17)
(Fisher Exact Test	Windjammer	3 (27%)	Windjammer	3 (8%)	(* 0.12)
used on values < 5)	Room	1 (9%)	Room	0	(* 0.22)
2/27 Dinner	Staff mess	6 (67%)	Staff mess	26 (70%)	(* 0.56)
	Officers mess	1 (11%)	Officers mess	9 (24%)	(* 0.36)
(Fisher Exact Test	Windjammer	2 (22%)	Windjammer	4 (11%)	(* 0.33)
used on values < 5)	Room	0	Room	1 (3%)	(* 0.80)
2/28 Breakfast	Staff mess	2 (33%)	Staff mess	24 (80%)	0.12 (0.18–0.85)
					(* 0.038)
(Fisher Exact Test					( 0.020)
used on values < 5)	Officers mess	1 (17%)	Officers mess	6 (20%)	(* 0.67)
		1 (1770)			( 0.07)
	Windjammer	3 (50%)	Windjammer	2 (7%)	14.0 (1.6–120.0) †
				(***)	(* 0.024)
					( 313_ 1)
	Room	0	Room	0	
2/28 Lunch	Staff mess	5 (50%)	Staff mess	27 (75%)	(* 0.13)
	Officers mess	2 (20%)	Officers mess	10 (28%)	(* 0.48)
(Fisher Exact Test	Windjammer	3 (30%)	Windjammer	2 (6%)	(* 0.06)
used on values < 5)	Room	0	Room	0	
2/28 Dinner	Staff mess	4 (44%)	Staff mess	28 (76%)	(* 0.08)
	Officers mess	2 (22%)	Officers mess	8 (22%)	(* 0.64)
(Fisher Exact Test	Windjammer	2 (22%)	Windjammer	3 (8%)	(* 0.25)
used on values < 5)	Room	1 (11%)	Room	0	
3/1 Breakfast	Staff mess	2 (40%)	Staff mess	25 (78%)	(* 0.11)
	Officers mess	0	Officers mess	7 (22%)	(* 0.33)
(Fisher Exact Test					
used on values < 5)	Windjammer	3 (60%)	Windjammer	1 (3%)	46.5 (3.2–676.2) †
					(* 0.005)
	Room	0	Room	0	
3/1 Lunch	Staff mess	3 (43%)	Staff mess	26 (79%)	(* 0.075)
	Officers mess	0	Officers mess	9 (27%)	(* 0.14)
(Fisher Exact Test	Windjammer	2 (29%)	Windjammer	1 (3%)	(* 0.074)
used on values < 5)	Room	2 (29%)	Room	0	

3/1 Dinner	Staff mess	4 (40%)	Staff mess	26 (74%)	0.23 (0.05 – 1.01)
					(* 0.052)
(Fisher Exact Test					
used on values < 5)	Officers mess	0	Officers mess	10 (29%)	
	Windjammer	3 (30%)	Windjammer	2 (6%)	(* 0.065)
	Room	3 (30%)	Room	0	
Number of	Mean	3.9	Mean	2.6	Students t test
glasses of	Median	3.5	Median	2.0	
unbottled water					T Stat $= 1.57$
consumed					P Value = 0.12
Number of	Mean	1.5	Mean	1.7	Students t test
glasses of	Median	1.0	Median	1.0	T Stat $= 0.30$
bottled water					P Value = 0.76
consumed					
Number of	Mean	2.3	Mean	2.2	Students t test
drinks	Median	2.0	Median	2.0	T Stat $= 0.14$
containing ice					P Value = 0.89
consumed					
Use of casino	0		1 (2% of respondents)		
Visit bars	6 (38% of respondents)		12 (25% of respondents)		(* 0.27)
Frequency of	Not analyzed due to wrong				
hand sanitizer	survey distribut	ed to cases			
use	vs. controls				

<sup>†</sup> Indicates significant difference at 95% confidence interval \* Fischer's 1-tailed P value used instead of OR due to a value ≤ 5