Annex 3 – Questionnaires

INSTITUT PASTEUR

INSTITUT DE VEILLE SANITAIRE

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« Feasibility study for a collaborative surveillance of *Listeria* infections in Europe ».

QUESTIONNAIRE

EPIDEMIOLOGY AND SURVEILLANCE

Questionnaire to be completed by the national body responsible for surveillance of infectious diseases

Please, return the completed questionnaire, no later than January 21, 2002, to the following address:

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THANK YOU FOR YOUR CO-OPERATION

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Institution responsible for filling out this questionnaire:

Name of the Institution	
Street	
Zip Code / Town	
Country	
Telephone:	
Fax:	
E-mail Address:	
Contact Person	
Type of Institution:	

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For the purpose of this survey, we distinguish the following data sources:

Surveillance systems involving a continuous systematic collection of data:

- Statutory notification of *Listeria* infections
- Universal voluntary reporting of *Listeria* infections
- Sentinel reporting of *Listeria* infections by selected laboratories, hospitals, or medical practitioners
- Surveillance of syndromes (blood stream infections, central nervous system infections, perinatal infections) that include infections by *Listeria monocytogenes*

Data sources based on centralisation of strains

- national reference centre or laboratory, or other reference laboratories that centralise *Listeria monocytogenes* isolates.

Ad hoc data sources

- ad hoc studies or surveys providing data on a certain period of time

Please, indicate the data source(s) in your country and fill the corresponding section:

Statutory notification of *Listeria* infections ..... ☐

Universal voluntary reporting of *Listeria* infections ..... ☐

Sentinel reporting of *Listeria* infections ..... ☐

Surveillance of syndromes ..... ☐

National reference centre, or other reference laboratory (ies) ..... ☐

Ad hoc studies or surveys ..... ☐

1. Statutory Notification

1.1. In your country, are *Listeria* infections statutorily notifiable (i.e. by law) ?:

Yes ☐ No ☐

If No, please go to question **2.1.**

1.2. What are the objectives of your surveillance system based on the statutory notification:

– To detect outbreaks ..... ☐

– To monitor trends ..... ☐

– To set up, target and/or evaluate food safety interventions ..... ☐

– To improve the knowledge on the epidemiology of *Listeria* infections ..... ☐

– Other (Please, specify) .....

1.3. Since when have *Listeria* infections been statutorily notifiable in your country?

– Before 1990 ..... ☐

– Between 1990 and 1995 ..... ☐

– After 1995 (please, specify year of introduction): ..... ☐

1.4. For statutory notification, is there a case definition for *Listeria* infections?

Yes ☐ No ☐

If No, please go to question **1.5**

For statutory notification, what is the case definition for *Listeria* infections?

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If the case definition for *Listeria* infections is published, please, quote the reference(s): .....

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Since when has this case definition been used?

– Before 1990 ..... ☐

– Between 1990 and 1995 ..... ☐

– After 1995 (please, specify year of introduction): ..... ☐

For statutory notification, do you have a specific case definition for a Central Nervous System *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for Central Nervous System *Listeria* infection?

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.....

For statutory notification, do you have a specific case definition for a pregnancy associated *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for pregnancy associated *Listeria* infection?

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In case of pregnancy associated *Listeria* infections, is a mother-infant pair counted as one or two cases?

One case ..... ☐
Two cases ..... ☐

1.5. Who is required to notify?

– All physicians who diagnose a *Listeria* infection ..... ☐
– All laboratories which diagnose a *Listeria* infection ..... ☐

– Other, (please specify) : .....

1.6. Which information is provided at the notification?
(If a form is used, please, attach a copy to this questionnaire)

Sending institution
– Name ..... ☐
– Address ..... ☐
– Hospital and department where the patient is hospitalised ..... ☐

Demographic data of case-patient
– Name or part of the name ..... ☐
– Age or Date of birth ..... ☐
– Sex ..... ☐
– Place of residence ..... ☐

Clinical information
– Type of symptoms ..... ☐
– Date of onset of symptoms ..... ☐
– Principal diagnosis (meningitis, septicaemia etc) ..... ☐
– Pregnancy associated ..... ☐
– Underlying medical conditions
  – Illness ..... ☐
  – Treatment (e.g. corticosteroids, cytostatics) ..... ☐
– Hospitalisation ..... ☐
– Outcome (cure, death, abortion, stillbirth, sequelae) ..... ☐
– Date of death, abortion or stillbirth ..... ☐

Diagnostic criteria
– Isolation of *Listeria monocytogenes* ..... ☐
– PCR ..... ☐
– MRI image ..... ☐
– Clinical symptoms ..... ☐
– Serology ..... ☐

– Other, Please specify .....

Laboratory information
– Investigated material (e.g. blood, placenta, CSF) ..... ☐
– Date of isolation ..... ☐
– Date of first positive sample ..... ☐

– Other (Please, specify): .....

Epidemiological information
– Putative risk factor(s) ..... ☐
– Suspected source of infection ..... ☐
– Link to other cases ..... ☐
– Food history ..... ☐
– Travel history ..... ☐

1.7. Are additional investigations carried out?

– Routinely ..... ☐
– Occasionally ..... ☐

If yes, please describe type of investigations and when they are carried out: .....

.....

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1.8. To whom are *Listeria* infections statutory notified?

– Ministry of Health ..... ☐
– National Surveillance Centre (NSC) directly ..... ☐
– Local health authority first, then NSC ..... ☐
– Local health authority only ..... ☐

– Others, please, specify: .....

What is the frequency of notifying for *Listeria* infections by local health departments to the National Surveillance Centre or the Ministry of Health?

– Immediately ..... ☐
– Weekly ..... ☐
– Monthly ..... ☐
– Quarterly ..... ☐

– Other (Please, specify): .....

In what format are data forwarded from local level to national level?

– As single cases ..... ☐
– In aggregated form ..... ☐

– Other (Please, specify): .....

1.9. At what periodicity are the data analysed at national level?

– Weekly ..... ☐
– Monthly ..... ☐
– Quarterly ..... ☐
– Yearly ..... ☐

– Other (Please, specify): .....

1.10. Has the statutory notification system been evaluated?

Yes ☐ No ☐

If yes, please, report the period and describe briefly methods and results of the evaluation(s) (namely sensitivity, representativeness, and timeliness).

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1.11. If these data are published and a reference is available, please quote the reference:

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1.12. Please, complete the following table with data of *Listeria* infections cases notified through the statutory notification system from the 5 most recent years available

Year	Total number of cases	Number of pregnancy associated cases	Number of Central Nervous System infections	Number of Bacteriaemia/ Septicaemia cases	Other cases

2. Universal voluntary reporting

2.1. In your country, is there universal voluntary reporting of *Listeria* infections?:

Yes ☐ No ☐

If No, please go to question **3.1.**

2.2. What are the objectives of your surveillance system based on universal voluntary reporting:

– To detect outbreaks ..... ☐
– To monitor trends ..... ☐
– To set up, target and/or evaluate food safety interventions ..... ☐
– To improve the knowledge on the epidemiology of *Listeria* infections ..... ☐
– Other (Please, specify) .....
.....

2.3. Since when is there universal voluntary reporting of *Listeria* infections in your country?

– Before 1990 ..... ☐
– Between 1990 and 1995 ..... ☐
– After 1995 (please, specify year of introduction): ..... ☐

2.4. For universal voluntary reporting, is there a case definition for *Listeria* infections?

Yes ☐ No ☐

If No, please go to question **2.5.**

For universal voluntary reporting, what is the case definition for *Listeria* infections?

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If the case definition for *Listeria* infections is published, please, quote the reference(s): .....
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Since when has this case definition been used?

– Before 1990 ..... ☐
– Between 1990 and 1995 ..... ☐
– After 1995 (please, specify year of introduction): ..... ☐

For universal voluntary reporting, do you have a specific case definition for a Central Nervous System *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for Central Nervous System *Listeria* infection?

.....

For universal voluntary reporting, do you have a specific case definition for a pregnancy associated *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for pregnancy associated *Listeria* infection?

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In case of pregnancy associated *Listeria* infections, is a mother-infant pair counted as one or two cases?

– One case ..... ☐
– Two cases ..... ☐

2.6. Which items are included in the reporting?
(If a form is used, please, attach a copy to this questionnaire)

Sending institution
– Name ..... ☐
– Address ..... ☐
– Hospital and department where the patient is hospitalised ..... ☐

Demographic data of case-patient
– Name or part of the name ..... ☐
– Age or Date of birth ..... ☐
– Sex ..... ☐
– Place of residence ..... ☐

Clinical information
– Type of symptoms ..... ☐
– Date of onset of symptoms ..... ☐
– Principal diagnosis (meningitis, septicaemia etc.) ..... ☐
– Pregnancy associated ..... ☐
– Underlying medical conditions
  – Illness ..... ☐
  – Treatment (e.g. corticosteroids, cytostatics) ..... ☐
– Hospitalisation ..... ☐
– Outcome (cure, death, abortion, stillbirth, sequelae) ..... ☐
– Date of death, abortion or stillbirth ..... ☐

Diagnostic criteria
– Isolation of *Listeria monocytogenes* ..... ☐
– PCR ..... ☐
– MRI image ..... ☐
– Clinical symptoms ..... ☐
– Serology ..... ☐

– Other, Please specify .....

Laboratory information
– Investigated material (e.g. blood, placenta, CSF) ..... ☐
– Date of isolation ..... ☐
– Date of first positive sample ..... ☐

– Other (Please, specify): .....

Epidemiological information
– Putative risk factor(s) ..... ☐
– Suspected source of infection ..... ☐
– Link to other cases ..... ☐
– Food history ..... ☐
– Travel history ..... ☐

– Other, Please specify: .....

2.7. Are additional investigations voluntarily carried out?

– Routinely ..... ☐
– Occasionally ..... ☐

If yes, please describe type of investigations and when they are carried out: .....

.....

.....

.....

2.8. To whom are *Listeria* infections reported?

– Ministry of Health ..... ☐
– National Surveillance Centre (NSC) directly ..... ☐
– Local health authority first, then NSC ..... ☐
– Local health authority only ..... ☐

– Others, please, specify: .....

What is the frequency of reporting for *Listeria* infections by local health departments to the National Surveillance Centre or the Ministry of Health?

– Immediately ..... ☐
– Weekly ..... ☐
– Monthly ..... ☐
– Quarterly ..... ☐

– Other (Please, specify): .....

In what format are data forwarded from local level to national level?

– As single cases ..... ☐
– In aggregated form ..... ☐

– Other (Please, specify): .....

2.9. At what periodicity are the data analysed?

– Weekly ..... ☐
– Monthly ..... ☐
– Quarterly ..... ☐
– Yearly ..... ☐

– Other (Please, specify): .....

2.10. Has the universal voluntary reporting been evaluated?

Yes ☐ No ☐

If yes, please, report the period and briefly describe methods and results of the evaluation(s) (namely sensitivity, representativeness, and timeliness).

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2.11. If these data are published and a reference is available, please quote the reference:

.....

2.12. Please, complete the following table with data of *Listeria* infections cases reported on universal voluntary basis from the 5 most recent years available

Year	Total number of cases	Number of pregnancy associated cases	Number of Central Nervous System infections	Number of Bacteriaemia/ Septicaemia cases	Other cases

3. Sentinel surveillance system for *Listeria* infections

3.1. In your country, are there selected practices / laboratories / hospitals / local health departments reporting *Listeria* infections on a voluntary basis (i.e. is there a sentinel surveillance system for *Listeria* infections)?

Yes ☐ No ☐

If No, please, go to question **4.1.**

3.2. When was the sentinel surveillance for *Listeria* infections introduced?

– Before 1990 ..... ☐
– Between 1990 and 1995 ..... ☐
– After 1995 (please, specify year of introduction): .....

3.3. What are the objectives of your sentinel surveillance system:

– To detect outbreaks ..... ☐
– To monitor trends ..... ☐
– To set up, target and/or evaluate food safety interventions ..... ☐
– To improve the knowledge on the epidemiology of the *Listeria* infections ..... ☐
– Other (Please, specify): .....

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3.4. In this sentinel system is there a case definition for *Listeria* infections?

Yes ☐ No ☐

What is the case definition for *Listeria* infections for the sentinel system?

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If the case definition for *Listeria* infections is published, please, quote the reference(s): .....

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Since when has this case definition been used?
– Before 1990 ..... ☐
– Between 1990 and 1995 ..... ☐
– After 1995 (please, specify year of introduction): .....

For sentinel reporting, do you have a specific case definition for a Central Nervous System *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for Central Nervous System *Listeria* infection?

.....

For sentinel reporting, do you have a specific case definition for a pregnancy associated *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for pregnancy associated *Listeria* infection?

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In case of pregnancy associated *Listeria* infections, is the mother-infant pair counted as one or two cases?
– One case ..... ☐
– Two cases ..... ☐

3.5. What sort of institutions report to this sentinel surveillance system?

– Medical practices ..... ☐
– Laboratories ..... ☐
– Hospitals ..... ☐
– Others, please, specify: .....

Please describe the rational/strategy of the selection of institutions reporting to the sentinel surveillance

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Please, give a brief description of the representativeness, the coverage and the sensitivity of the sentinel system

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3.6. Which items are included in the reporting?
(If a form is used, please, attach a copy to this questionnaire)

Sending institution
– Name ..... ☐
– Address ..... ☐
– Hospital and department where the patient is hospitalised ..... ☐

Demographic data of case-patient
– Name or part of the name ..... ☐
– Age or Date of birth ..... ☐
– Sex ..... ☐
– Place of residence ..... ☐

Clinical information
– Type of symptoms ..... ☐
– Date of onset of symptoms ..... ☐
– Principal diagnosis (meningitis, septicaemia etc.) ..... ☐
– Pregnancy associated ..... ☐
– Underlying medical conditions
  – Illness ..... ☐
  – Treatment (e.g. corticosteroids, cytostatics) ..... ☐
– Hospitalisation ..... ☐
– Outcome (cure, death, abortion, stillbirth, sequelae) ..... ☐
– Date of death, abortion or stillbirth ..... ☐

Diagnostic criteria
– Isolation of *Listeria monocytogenes* ..... ☐
– PCR ..... ☐
– MRI image ..... ☐
– Clinical symptoms ..... ☐
– Serology ..... ☐

– Other, ...

Laboratory information
– Investigated material (e.g. blood, placenta, CSF) ..... ☐
– Date of isolation ..... ☐
– Date of first positive sample ..... ☐

– Other, ...

Epidemiological information
– Putative risk factor(s) ..... ☐
– Suspected source of infection ..... ☐
– Link to other cases ..... ☐
– Food history ..... ☐
– Travel history ..... ☐

– Other, …(please, specify): .....

3.7. Are additional investigations carried out?

– Routinely ..... ☐
– Occasionally ..... ☐

If yes, please describe type of investigation and when they are carried out:

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3.8. Which is the co-ordinating institution for the data gathered in the sentinel surveillance system?

– Ministry of Health ..... ☐
– National Surveillance Centre (NSC) ..... ☐
– National or other Reference Laboratory ..... ☐

– Other (Please, specify): .....

3.9. How often are data sent to the sentinel surveillance co-ordinating centre from the participating sites?

– Immediately ..... ☐
– Weekly ..... ☐
– Monthly ..... ☐
– Quarterly ..... ☐

– Other (please, specify): .....

3.10. In what format are data forwarded to the sentinel surveillance co-ordinating centre from the participating sites?

– As single cases ..... ☐
– In aggregated form ..... ☐

– Other (Please, specify): .....

3.11. At what periodicity are the data analysed?

– Weekly ..... ☐
– Monthly ..... ☐
– Quarterly ..... ☐
– Yearly ..... ☐

– Other (Please, specify): .....

3.12. Please, complete the following table with data from the 5 most recent years of cases of *Listeria* infections notified through the sentinel surveillance system, and, if available, the estimated incidence of *Listeria* infections.

Year	Total number of cases	Number of pregnancy associated cases	Number of Central Nervous System infections	Number of Bacteriaemia/ Septicaemia cases	Other cases

3.13. If any of these data are published, please quote the reference:

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4. Syndrome based surveillance

In your country are there any systems for the surveillance of syndromes that may include infections by *Listeria* (bloodstream infections, central nervous system infections, perinatal infections)

Yes ☐ No ☐

If no, please go to section **5.**

4.1. What are the main objectives of this surveillance system:

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4.2. When was this surveillance system introduced?

– Before 1990 ..... ☐
– Between 1990 and 1995 ..... ☐
– After 1995 (please, specify year of introduction): .....

4.3. Do you have a specific case definition for *Listeria* infections in this surveillance system?

Yes ☐ No ☐

If No, please, go to question **4.4.**

What are the case definitions for *Listeria* infections for this surveillance system?

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If the(se) case definition(s) for *Listeria* infections is published, please, quote the reference(s):

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Since when has this case definition(s) been used?

– Before 1990 ..... ☐
– Between 1990 and 1995 ..... ☐
– After 1995 (please, specify year of introduction): .....

For this surveillance system, do you have a specific case definition for a Central Nervous System *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for Central Nervous System *Listeria* infection?

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.....

For this surveillance system, do you have a specific case definition for a pregnancy associated *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for pregnancy associated *Listeria* infection?

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In case of pregnancy associated *Listeria* infections, is the mother-infant pair counted as one or two cases?

– One case ..... ☐
– Two cases ..... ☐

4.4. What sort of institutions report to this surveillance system?

– Medical practices ..... ☐
– Laboratories ..... ☐
– Hospitals ..... ☐

– Others (please, specify): .....

Please, describe the institutions that report in this surveillance system in terms of coverage and representativeness:

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4.5. Which items are included in the reporting?
(If a form is used, please, attach a copy to this questionnaire)

Sending institution
– Name ..... ☐
– Address ..... ☐
– Hospital and department where the patient is hospitalised ..... ☐

Demographic data of case-patient
– Name or part of the name ..... ☐
– Age or Date of birth ..... ☐
– Sex ..... ☐
– Place of residence ..... ☐

Clinical information
– Type of symptoms ..... ☐
– Date of onset of symptoms ..... ☐
– Principal diagnosis (meningitis, septicaemia etc.) ..... ☐
– Pregnancy associated ..... ☐
– Underlying medical conditions
  – Illness ..... ☐
  – Treatment (e.g. corticosteroids, cytostatics) ..... ☐
– Hospitalisation ..... ☐
– Outcome (cure, death, abortion, stillbirth, sequelae) ..... ☐
– Date of death, abortion or stillbirth ..... ☐

Diagnostic criteria
– Isolation of *Listeria monocytogenes* ..... ☐
– PCR ..... ☐
– MRI image ..... ☐
– Clinical symptoms ..... ☐
– Serology ..... ☐

– Other (please, specify): .....

Laboratory information
– Investigated material (e.g. blood, placenta, CSF) ..... ☐
– Date of isolation ..... ☐
– Date of first positive sample ..... ☐

– Other (please, specify): .....

Epidemiological information
– Putative risk factor(s) ..... ☐
– Suspected source of infection ..... ☐
– Link to other cases ..... ☐
– Food history ..... ☐
– Travel history ..... ☐

– Other (please, specify): .....

4.6. Which is the co-ordinating institution for the data gathered in this surveillance system?

– Ministry of Health ..... ☐
– National Surveillance Centre (NSC) ..... ☐
– National reference laboratory ..... ☐

– Other (please, specify): .....

4.7. How often are data sent to the surveillance co-ordinating centre from the participating sites?

– Immediately ..... ☐
– Weekly ..... ☐
– Monthly ..... ☐
– Quarterly ..... ☐

– Other (please, specify): .....

4.8. In which form are data forwarded to the sentinel surveillance co-ordinating centre from the participating sites?

– As single cases ..... ☐
– In aggregated form ..... ☐

– Other (please, specify): .....

4.9. At what periodicity are the data analysed?

– Weekly ..... ☐
– Monthly ..... ☐
– Quarterly ..... ☐
– Yearly ..... ☐

– Other (Please, specify): .....

4.10. Please, complete the following table with data from the 5 most recent years of cases and/or the estimated incidence of *Listeria* infections notified through this surveillance system.

Type of *Listeria* infection 1: (specify CNS, perinatal, bloodstream infection etc): .....

Year	Number of cases	Estimated incidence

Type of *Listeria* infection 2: (specify CNS, perinatal, bloodstream infection etc): .....

Year	Number of cases	Estimated incidence

4.11. If any of these data are published, please quote the reference:

.....

5. National Reference Laboratory and other reference laboratories

5.1. In your country, are *Listeria* monocytogenes isolates sent to a Reference Laboratory?

Yes, Often ☐ Sometimes ☐ Rarely ☐
Never ☐

If Never, please, go to question **6.1.**

If yes, at what level is (are) this laboratory(ies) ?

– National ..... ☐
– Provincial ..... ☐
– Regional ..... ☐
– National, provincial and regional ..... ☐
– Other, (please specify): .....

5.2. Please, give the number of reference laboratories to which laboratories send their *Listeria monocytogenes* isolates. .....

How many of these reference laboratory(ies) are involved in surveillance? .....

If None of these laboratories is involved in surveillance, please go to question **6.1.**

5.3. What are the main objectives of the Laboratory surveillance system:
– To detect outbreaks ..... ☐
– To monitor trends ..... ☐
– To set up, target and/or evaluate food safety interventions ..... ☐
– To improve the knowledge on the epidemiology of the *Listeria* infections ..... ☐
– Other (Please, specify) .....

5.4. When was the Reference Laboratory Surveillance for *Listeria* infections introduced?

– Before 1990 ..... ☐
– Between 1990 and 1995 ..... ☐
– After 1995 (please, specify year of introduction): .....

5.5. Do you have a case definition for *Listeria* infections in this Laboratory surveillance system?

Yes ☐ No ☐

If No, please, go to question **5.6.**

5.5.1 What is the case definition for *Listeria* infections for the Laboratory surveillance system?

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If the case definition for *Listeria* infections is published, please, quote the reference(s):

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Since when has this case definition been used?
– Before 1990 ..... ☐
– Between 1990 and 1995 ..... ☐
– After 1995 (please, specify year of introduction): .....

For the Laboratory surveillance system, do you have a specific case definition for a Central Nervous System *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for Central Nervous System *Listeria* infection?

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For the Laboratory surveillance system, do you have a specific case definition for a pregnancy associated *Listeria* infection?

Yes ☐ No ☐

If Yes, what is the case definition for pregnancy associated *Listeria* infection?

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In case of pregnancy associated *Listeria* infections, is the mother-infant pair counted as one or two cases?

– One case ..... ☐

– Two cases ..... ☐

5.6. Please, give a brief description of the representativeness, the coverage and the sensitivity of the Laboratory surveillance system.

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5.7. Please, complete the following table with data of *Listeria* infections cases reported on universal voluntary basis from the 5 most recent years available

Year	Total number of cases	Number of pregnancy associated cases	Number of Central Nervous System infections	Number of Bacteriaemia/ Septicaemia cases	Other cases

6. Other data sources

6.1. Are there other sources of data (survey, ad hoc studies….) on the number of human *Listeria* infections in your country?

Yes ☐ No ☐

If No, please go to question **7.1**

6.2. Please, describe them briefly :

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.....

6.3. Please, fill the following table with the cases of *Listeria* infections obtained from this source for the most recent year(s) data are available,

Year	Total number of cases	Number of pregnancy associated cases	Number of Central Nervous System infections	Number of Bacteriaemia/ Septicaemia cases	Other cases

6.4. If these data have been published, please quote the reference:

.....

.....

7. Outbreaks

7.1. Are there outbreak detection mechanisms within the surveillance system(s)?

Yes ☐ No ☐

7.2. Are there established criteria or thresholds for outbreak detection?

If yes, please, describe them for the system(s) in your country: .....

.....

.....

.....

.....

7.3. Are the results of typing/ subtyping of strains available for routine analysis of surveillance data?

Yes ☐ No ☐

7.4. Please, list for the last 10 years, all outbreaks of *Listeria* infections in your country according to the table provided (please complete one line for each outbreak):

Year	No. Cases	Transmission[1]	Incriminated food

U for unknown is applicable for all positions of the table

[1] Please, indicate if transmission was thought to be foodborne, nosocomial, through direct animal contact or unknown. For foodborne outbreaks, please indicate type of incriminated food, if available.

7.5. If any of these outbreaks are published, please quote the reference(s):

.....

.....

.....

.....

THANK YOU VERY MUCH FOR HAVING COMPLETED THIS QUESTIONNAIRE

Annex 3 (continued) – Questionnaires

INSTITUT PASTEUR

INSTITUT DE VEILLE SANITAIRE

« Feasibility study for a collaborative surveillance of *Listeria* infections in Europe ».

QUESTIONNAIRE

MICROBIOLOGY

Questionnaire to be completed by the Reference Laboratory. If there is no national reference, the questionnaire should be completed by those laboratories carrying out reference tasks for human *Listeria* infections. These laboratories can be at regional, provincial or any other subnational level. If several laboratories in the country have a significant reference function, a questionnaire should be completed by each of these laboratories.

Please, return the completed questionnaire, no later than January 21, 2002, to the following address:

INSTITUT PASTEUR
Laboratoire des *Listeria*
25-28 rue du Docteur Roux
75724 PARIS CEDEX 15 - FRANCE
Phone : 00.33.1.40.61.31.12
Fax : 00.33.1.40.61.35.67
Email : listeria@pasteur.fr

THANK YOU FOR YOUR CO-OPERATION

Contact persons at the Pasteur Institute :

Christine PHAN, Secretary

Dr Paul M.V. MARTIN

Dr Christine JACQUET

INSTITUT PASTEUR - Laboratoire des *Listeria*
25-28 rue du Docteur Roux
75724 PARIS CEDEX 15
FRANCE
Phone : 00.33.1.40.61.31.12
Fax : 00.33.1.40.61.35.67
Email : listeria@pasteur.fr

Contact persons at the Institut de Veille Sanitaire (InVS)

Dr Alberto PERRA
EPIET Fellow
Department of Infectious Diseases
Phone : 00.33.1.41.79.68.77
Fax : 00.33.1.41.79.67.69
Email : a.perra@invs.sante.fr

Dr Henriette de VALK
Coordinator of the Unit of Enteric, Foodborne and Zoonotic Diseases
Department of Infectious Diseases
Phone : 00.33.1.41.79.67.28
Fax : 00.33.1.41.79.67.69
Email : h.devalk@invs.sante.fr

Dr Jean-Claude DESENCLOS
Head of the Department of Infectious Diseases
Phone : 00.33.1.41.79.67. 20
Fax : 00.33.1.41.79.68. 72
Email : j.desenclos@invs.sante.fr

INSTITUT DE VEILLE SANITAIRE
12 rue du Val d'Osne
94415 SAINT-MAURICE CEDEX
FRANCE
http://www.invs.sante.fr

COUNTRY : .....

THIS QUESTIONNAIRE IS COMPLETED BY :

NAME : .....

FUNCTION : .....

ADDRESS : .....

.....

.....

.....

PHONE : .....

FAX : .....

EMAIL : .....

TYPE OF LABORATORY :

- **University** ☐
- **Hospital (public)** ☐
- **Public Health Institute** ☐
- **Institute (Foundation)** ☐
- **Other** ☐ **, please specify :** .....

.....

Section 1. LISTERIOSIS NOTIFICATION

1.1. In your country, is listeriosis statutory notifiable (i.e. by law) ?

Yes ☐ No ☐

If «Yes», who is required to make these notifications?

✓ physicians ☐
✓ microbiologists ☐
✓ other ☐, please specify : .....

1.2. In your country, is it statutory for medical microbiologists to send all *Listeria* monocytogenes strains isolated from humans to a «reference laboratory»?

Yes ☐ No ☐

If «Yes», since when? .....

Section 2. REFERENCE LABORATORY

2.1. Is your laboratory :

✓ A National Reference Laboratory? Yes ☐ No ☐

If «Yes», is it ☐ officially appointed
☐ recommended, by .....
☐ doing reference work on its own initiative

✓ A Regional/Provincial or other sub national level Reference Laboratory? Yes ☐ No ☐

If «Yes», please specify : .....

is it ☐ officially appointed
☐ recommended, by .....
☐ doing reference work on its own initiative

2.2. What are the roles of the Reference Laboratory?

✓ surveillance ☐
✓ outbreak detection ☐
✓ training ☐
✓ providing expertise ☐
✓ distribution (strains, sera…) ☐
✓ research ☐
✓ other ☐, please specify : .....

2.3. Are there separate Reference Laboratories for :

✓ human listeriosis Yes ☐ No ☐ Unknown ☐
✓ *Listeria* from food Yes ☐ No ☐ Unknown ☐
✓ animal listeriosis Yes ☐ No ☐ Unknown ☐

Please provide details of a point of contact for the Reference Laboratory for *Listeria* from food in your country (ie name, address, telephone, fax and Email) :

.....

.....

.....

.....

.....

Please provide details of a point of contact for the Reference Laboratory for animal listeriosis in your country (ie name, address, telephone, fax and Email):

.....

.....

.....

.....

.....

Section 3. ACTIVITIES OF THE LABORATORY

3.1. HUMAN STRAINS / SPECIMEN

3.1.1. Does your laboratory routinely examine human specimens for *Listeria* by culture?

Yes ☐ No ☐

3.1.2. Does your laboratory routinely examine human specimens for *Listeria* by molecular diagnostic methods (PCR etc)?

Yes ☐ No ☐

3.1.3. Does your laboratory receive information on human *Listeria* strains isolated by other laboratories in your country without receiving the strain itself?

Yes ☐ No ☐

If «No», go to question 3.1.5.

What types of information does your laboratory receive:

✓ clinical data ☐
✓ epidemiological data ☐
✓ strains characteristics ☐
✓ site of isolation of strain ☐

3.1.4. What types of laboratories are sending information on human *Listeria* strains (without sending the strains) to your laboratory?

✓ local reference laboratories ☐ ☐
✓ hospital laboratories ☐ ☐
✓ private laboratories ☐ ☐
✓ others ☐ ☐, please specify :

3.1.5. Does your laboratory receive human *Listeria* strains from other laboratories in your country?

Yes ☐ No ☐

If «No», go to question 3.1.9.

3.1.6. Does your laboratory collect information on these *Listeria* strains sent by other laboratories?

Yes ☐ No ☐

If «No», please go to question 3.1.7.

If «Yes, what types of information:

✓ clinical data ☐
✓ epidemiological data ☐
✓ strains characteristics ☐
✓ site of isolation of strain ☐

3.1.7. What types of laboratories are sending human *Listeria* strains to your laboratory ?

	Yes	No	% of strains received in year 2000
✓ other reference laboratory	☐	☐	.....
✓ hospital laboratories	☐	☐	.....
✓ private laboratories	☐	☐	.....
✓ others	☐	☐	.....

, please specify : .....

3.1.8. In which circumstances are human *Listeria* strains sent to your laboratory? (several answers are possible)

	from other References Laboratories	from hospital Laboratories	from private Laboratories	from other Laboratories
✓ systematically	☐	☐	☐	☐
■ every strain immediately after isolation	☐	☐	☐	☐
■ every strain at regular intervals	☐	☐	☐	☐
■ every strain at irregular intervals	☐	☐	☐	☐
✓ not systematically	☐	☐	☐	☐
■ according to the will of the laboratory	☐	☐	☐	☐
■ to establish a link with a contaminated food	☐	☐	☐	☐
■ when there is a suspicion of an outbreak	☐	☐	☐	☐
■ during outbreaks	☐	☐	☐	☐
■ for ad hoc studies or surveys	☐	☐	☐	☐
✓ do not know	☐	☐	☐	☐
✓ other	☐	☐	☐	☐

, please specify : .....

3.1.9. In your laboratory, how many strains did you isolate or/and receive for the year 2000 (or the latest available year) ?

Year..... Number .....

3.1.10. For the year 2000 (or the latest available year), can you estimate the total of *Listeria* strains isolated from patients in your country?

Yes ☐ Year..... Number .....
No ☐
Estimate not possible ☐

3.1.11. Depending of countries, we will consider three possible sources of *Listeria* strains, which could be used for the microbiological surveillance of human listeriosis. What is the situation that best describes your system?

✓ strains are sent statutorily, or on a voluntary basis, at the national/regional level ☐
✓ strains are sent statutorily or on a voluntary basis by selected laboratories (sentinel system) ☐
✓ strains are collected occasionally from a variety of laboratories ☐
✓ strains are collected on a continuous basis ☐

3.2. MICROBIOLOGICAL METHODS FOR HUMAN STRAINS

3.2.1. Does your laboratory carry out identification of *Listeria* strains ?

Yes ☐ No ☐

3.2.1. If «*Yes*», please briefly describe your laboratory procedures for the identification of human *Listeria* strains :

.....

.....

.....

.....

.....

3.2.2. Is the method that you described recommended?

Yes ☐ No ☐ Unknown ☐

If «Yes », is it recommended by :
✓ National Reference Laboratory ☐
✓ National Public Health Service / Institute ☐
✓ National/International Scientific Society ☐
✓ Other ☐, please specify : .....

3.2.3. Does your laboratory carry out typing of human *Listeria* monocytogenes strains?

Yes ☐ No ☐

If «No», go to question 3.2.10.

3.2.4. Is typing routinely performed?

Yes ☐ No ☐

3.2.5. In your laboratory, is a recommended procedure for typing of *Listeria monocytogenes* strains used?

Yes ☐ No ☐

3.2.6. If «Yes», whom is it recommended by?

✓ National Reference Laboratory ☐
✓ National Public Health Service / Institute ☐
✓ National/International Scientific Society ☐
✓ Other ☐, please specify : .....

3.2.7. Which of the following typing methods are performed in your laboratory and in which circumstances?
(several answers are possible)

	routinely (ongoing)* Yes	No	routinely (at intervals)* Yes	No	for specific investigations** Yes	No	ad hoc studies*** Yes	No
Phenotypic methods								
a) Serotyping	☐	☐	☐	☐	☐	☐	☐	☐
b) Phage-typing	☐	☐	☐	☐	☐	☐	☐	☐
c) Bacteriocin typing	☐	☐	☐	☐	☐	☐	☐	☐
d) Biotyping (cadmium, arsenic, ….)	☐	☐	☐	☐	☐	☐	☐	☐
Molecular methods								
a) Multilocus enzyme electrophoresis (MEE)	☐	☐	☐	☐	☐	☐	☐	☐
b) Plasmid profiles	☐	☐	☐	☐	☐	☐	☐	☐
c) Sequencing	☐	☐	☐	☐	☐	☐	☐	☐
d) PCR-based methods	☐	☐	☐	☐	☐	☐	☐	☐
✓ RAPD	☐	☐	☐	☐	☐	☐	☐	☐
✓ Repetitive element sequence-based PCR	☐	☐	☐	☐	☐	☐	☐	☐
✓ Other	☐	☐	☐	☐	☐	☐	☐	☐,
please specify :								
e) Restriction fragment length polymorphism analysis								
✓ Low frequency cutting enzyme with pulsed field gel electrophoresis (PFGE)	☐	☐	☐	☐	☐	☐	☐	☐
✓ Frequent cutting enzyme (REA)	☐	☐	☐	☐	☐	☐	☐	☐
f) Probe-based methods	☐	☐	☐	☐	☐	☐	☐	☐
✓ Ribotyping	☐	☐	☐	☐	☐	☐	☐	☐
✓ Other	☐	☐	☐	☐	☐	☐	☐	☐,
please specify :								

* : ongoing : immediately upon reception ; at intervals : monthly, quarterly, etc …
** : outbreak, nosocomial infection …
*** : ad hoc studies such as special surveys, research projects etc. …

If neither serotyping nor PFGE are performed in your laboratory, please go to question 3.2.10.

3.2.8. Is serotyping of *Listeria* monocytogenes strains performed with :

✓ commercially available antisera ☐
✓ «home-made» antisera ☐
✓ «home-made» antisera obtained from another laboratory ☐

3.2.9. Which enzymes are used for PFGE ?

.....

3.2.10. Which type of electrophoresis is used for PFGE ?

☐ CHEF ☐ FIGE ☐ other, please specify.....

3.2.11. How are PFGE profiles compared?

✓ visually ☐
✓ with an image analysis software ☐ , please specify the name of the software.....
✓no comparison ☐

3.2.12. Is antibiotic susceptibility of *Listeria monocytogenes* human strains tested?

Yes ☐ No ☐

If «No», please go to question 3.3.1.

If «Yes», on all strains ☐
on a subset of strains ☐ , please specify : .....

3.2.13. If «Yes» to question 3.2.12., please describe briefly your laboratory procedure for testing antibiotic susceptibility of *Listeria* monocytogenes human strains (media used, methods, antibiotic tested, etc….)

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

3.3. <u>SURVEILLANCE / OUTBREAK DETECTION OF HUMAN LISTERIOSIS</u>

3.3.1. Does your laboratory undertake a microbiological surveillance of human listeriosis?

Yes ☐ No ☐

If «Yes», since when .....

3.3.2. Does your laboratory have a procedure for the detection of outbreaks of human listeriosis?

Yes ☐ No ☐

If «Yes», since when .....

If «No», please go to question 3.3.5.

3.3.3. Please, briefly describe the method used to detect outbreaks :

✓ by measuring an increase in total number of cases/strains ☐
✓ by measuring an increase in the number of strains by type/subtypes ☐
✓ other ☐ ,
please specify : .....

3.3.4. For outbreak detection purposes, how often are data analysed in your laboratory?

✓ every time a new strain is received ☐
✓ once a week ☐
✓ once a month ☐
✓ other ☐ , please specify : .....

3.3.5. How many outbreaks have been identified in your country since 1995?

Year	Number of cases	Vehicle (if known)

3.4. *Listeria* FOOD ISOLATES

3.4.1. Does your laboratory perform routine testing of foodstuffs for *Listeria*?

Yes ☐ No ☐

3.4.2. Does your laboratory exchange information on strains with laboratories concerned with food isolates?

Yes ☐ No ☐

3.4.3. Does your laboratory receive *Listeria* strains isolated from foodstuffs by other laboratories?

Yes ☐ No ☐

If «No» go to question 3.5.1.

3.4.4. If «Yes», does your laboratory receive

✓ all strains isolated from food stuffs ☐
✓ those suspected to be linked to human cases ☐
✓ other ☐, please specify : .....

3.4.5. How many *Listeria* strains isolates from food were examined in your laboratory in 2000 (or the last available year) .....
.....

3.4.6. From which types of laboratories does your laboratory receive *Listeria* strains isolated from food?

	Yes	No	% of strains received in year 2000
✓ from public laboratories	☐	☐	.....
✓ from private laboratories	☐	☐	.....
✓ from others	☐	☐	.....

, please specify : .....

3.4.7. When are *Listeria strains* isolated from food sent to your laboratory?
(several answers are possible)

	from public Laboratories	from private Laboratories	from others Laboratories
✓ systematically	☐	☐	☐
■ every strain immediately after isolation	☐	☐	☐
■ every strain at regular intervals	☐	☐	☐
■ every strain at irregular intervals	☐	☐	☐
✓ not systematically	☐	☐	☐
■ according to the will of the laboratory	☐	☐	☐
■ to establish a link between cases and a contaminated food	☐	☐	☐
■ when there is a suspicion of an outbreak	☐	☐	☐
■ during outbreaks	☐	☐	☐
■ for ad hoc studies or surveys	☐	☐	☐
✓ do not know	☐	☐	☐
✓ other	☐	☐	☐

, please specify : .....

3.4.8. Does your laboratory carry out identification of *Listeria* strains isolated from foodstuffs?

Yes ☐ No ☐

In some cases ☐ , please specify : .....

.....

If «No», please go to the question 3.4.11.

3.4.9. Is the procedure for identification of *Listeria* in foodstuffs the same as for strains isolated from human samples?

Yes ☐ No ☐

If «Yes», please go to the question 3.4.11.

3.4.10. If «No» to question 3.4.9., please describe briefly your laboratory procedure for the identification of *Listeria* strains from foodstuffs :

.....

.....

.....

.....

.....

3.4.11. Does your laboratory conduct typing of *Listeria* strains isolated from foodstuffs?

Yes ☐ No ☐

In some cases ☐, please specify : .....

If «No», please go to the question 3.5.1.

If «Yes», is the procedure for typing of *Listeria* strains isolated from foodstuffs the same as for human strains?

Yes ☐ No ☐

If «Yes», please go to the question 3.5.1.

3.4.12. If «No» to question 3.4.11, which of the following methods are used in your laboratory for the typing of *Listeria* isolates from food stuffs and when?
(several answers are possible)

	routinely (ongoing)*		routinely (at intervals)*		for specific investigations**		ad hoc studies***	
	Yes	No	Yes	No	Yes	No	Yes	No
Phenotypic methods								
a) Serotyping	☐	☐	☐	☐	☐	☐	☐	☐
b) Phage-typing	☐	☐	☐	☐	☐	☐	☐	☐
c) Bacteriocin typing	☐	☐	☐	☐	☐	☐	☐	☐
d) Biotyping (cadmium, arsenic, ….)	☐	☐	☐	☐	☐	☐	☐	☐
Molecular methods								
a) Multilocus enzyme electrophoresis (MEE)	☐	☐	☐	☐	☐	☐	☐	☐
b) Plasmid profiles	☐	☐	☐	☐	☐	☐	☐	☐
c) Sequencing	☐	☐	☐	☐	☐	☐	☐	☐
d) PCR-based methods	☐	☐	☐	☐	☐	☐	☐	☐
✓ RAPD	☐	☐	☐	☐	☐	☐	☐	☐
✓ Repetitive element sequence-based PCR	☐	☐	☐	☐	☐	☐	☐	☐
✓ Other	☐	☐	☐	☐	☐	☐	☐	☐,
please specify :								
e) Restriction fragment length polymorphism analysis								
✓ Low frequency cutting enzyme with pulsed field gel electrophoresis (PFGE)	☐	☐	☐	☐	☐	☐	☐	☐
✓ Frequent cutting enzyme (REA)	☐	☐	☐	☐	☐	☐	☐	☐
f) Probe-based methods	☐	☐	☐	☐	☐	☐	☐	☐
✓ Ribotyping	☐	☐	☐	☐	☐	☐	☐	☐
✓ Other	☐	☐	☐	☐	☐	☐	☐	☐,
please specify :								

* : ongoing : immediately upon reception ; at intervals : monthly, quarterly, etc …
** : outbreak, nosocomial infection …
*** : ad hoc survey, research projects etc. …

3.5. QUALITY ASSURANCE AND CONTROL

3.5.1. Is there an internal quality control procedure in your laboratory?

Yes ☐ No ☐

If «Yes», is this internal quality control used :

✓ for identification procedures ☐
✓ for typing procedures ☐

3.5.2. Does your laboratory participate in an external quality control system?

Yes ☐ No ☐

If «No», go to question 3.5.5.

If «Yes», which system? Please, describe briefly and, if possible, attach the guidelines to the end of the questionnaire:

.....

.....

.....

.....

3.5.3. Is the external quality control system conducted by :

✓ a national agency ☐ , please specify : .....
✓ an international agency ☐ , please specify : .....
✓ other ☐ , please specify : .....

3.5.4. Are the following procedures included in this external quality control system?

✓ identification procedure ☐
✓ typing procedure ☐
✓ other(s) ☐, please specify : .....

3.5.5. Is your laboratory engaged in a quality assurance system?

Yes ☐ No ☐

If «Yes», go to question 3.5.6.

If «No», does your laboratory intend to be engaged in a quality assurance system ?

Yes ☐ No ☐

If «No», go to question 3.6.1.

3.5.6. Is your laboratory :	**Yes**	**No**
✓ certified to ISO 9001: 2000 standard	☐	☐
✓ accredited to ISO/UE 17025 standard	☐	☐
✓ other standard	☐	☐ , please specify :.....

3.6. <u>LABORATORY SERVICES</u>

3.6.1. Does your laboratory provide reference material (strains, sera ...) to other laboratories, and if «Yes», for what purposes?

	No	**Yes**	**For diagnosis**	**For research**	
✓ strains	☐	☐	☐	☐	
✓ sera	☐	☐	☐	☐	
✓ phages	☐	☐	☐	☐	
✓ other	☐	☐	☐	☐ ,	please specify : .....

3.6.2. In your country, are there available guidelines for <u>routine laboratory diagnosis</u> of human listeriosis?

Yes ☐ No ☐

If «No», please go to question 3.6.4.

If «Yes», please attach a copy of these guidelines and return them along with the questionnaire.

3.6.3. If «Yes» to question 3.6.2, who issued these guidelines?

✓ National Reference Laboratory ☐
✓ National Public Health Service / Institute ☐
✓ National Scientific Society ☐
✓ Others ☐ , please specify : .....

3.6.4. Does your laboratory conduct training courses for laboratory staff?

Yes ☐ No ☐

If «Yes», indicate the content of training for :

✓ identification procedure ☐
✓ typing procedure ☐
✓ other(s) ☐ , please specify : .....

Section 4. RESEARCH (facultative answers)

4.1. Does your laboratory conduct any research projects on *Listeria* ?

Yes ☐ No ☐

If «Yes» in which of the following topics :
(several answers are possible)

✓ diagnostic ☐
✓ typing ☐
✓ epidemiology ☐
✓ genomic ☐
✓ immunology ☐
✓ pathogenicity ☐
✓ other fields ☐ , please specify : .....

4.2. Does your laboratory collaborate with other laboratories doing research on *Listeria*?

Yes ☐ No ☐

If «No», please go to the end of the questionnaire

4.3. If «Yes» to question 4.2., are these laboratories :
(several answers are possible)

✓ National ☐
✓ European (EU) ☐
✓ North American ☐
✓ Other ☐

4.4. Are such collaborations concerned with:

✓ exchange of strains ☐
✓ information exchanges ☐
✓ reference material (strains, sera,...) ☐

4.5. Do you think such collaboration with research laboratories is beneficial for :

✓ your laboratory
Yes ☐ No ☐

✓ the collaborating laboratory
Yes ☐ No ☐

THANK YOU VERY MUCH FOR COMPLETING THE QUESTIONNAIRE

Annex 4 – European Reference Laboratories for *Listeria*, National Surveillance Centres and contact persons

Country	National Surveillance Centre	Reference Laboratory
Austria	Reinhild Strauss FM for social Security and Generations Radetzkystr 2 A-1031 Vienna Phone: 43-171 100 43 67 Fax: 43 1 718 71 83 Reinhild.strauss@bmsg.gv.at	Franz Allerberger Bundesst. Bakt.-serol. Untersuchungsanstalt Schoepfstraße 41 A-6020 Innsbruck phone: +43-512-583391 Fax: +43-512-574414 Franz.Allerberger@uibk.ac.at
Belgium	Dr Ginette Marchant Epidemiology department Zoonose Scientific Institute of Public Health – Louis Pasteur 14, J. Wytsmanstreet B-1050 Brussels Phone: 322 642 5026 Fax: 322 642 5410 ginette.marchant@iph.fgov.be	Mark Yde Bacteriology section Scientific Institute of Public Health – Louis Pasteur 14, J. Wytsmanstreet B-1050 Brussels Phone: 322 642 5154 Fax: 322 642 5240 Marc.yde@iph.fgov.be
Denmark	Kare Molbak Statens Serum Institut 5, Artillerivej DK-2300 Copenhagen S Phone: +45 32 68 3157 Fax: +45 3268 31 65 KRM@SSI.DK	Peter Gerner-Smidt Statens Serum Institut 5, Artillerivej DK-2300 Copenhagen S Phone: +45 3268 3798 Fax: +45 3268 8238 PGS@SSI.DK
England and Wales	Mark Reacher Public Health Laboratory Service Communicable Disease Surveillance Centre, 61, Colindale Avenue, London NW9 5EQ Phone: 020 - 8200 - 6868 Extension 3431 Fax: 020 - 8200 - 7868 mreacher@phls.org.uk	Jim McLauchlin Central Public Health Laboratory Service Communicable Disease Surveillance Centre, 61, Colindale Avenue, London NW9 5EQ Phone: 44 20 8200 4400 Fax: 44 20 8358 3112 Jmclauchlin@phls.org.uk
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