

SA ACUTE FLACCID PARALYSIS (AFP) CASE INVESTIGATION FORM (CIF) (Nov 03)

(NB! All Dates dd-mm-yy. Use dark black ink & print legibly please)

Epid number: SOA - - - - - Date / /
(Will be assigned at Provincial Office) Country Prov Code District Code Year Onset Case number Province Received CIF: / /
 EPI (SA) Received CIF: / /

Surveillance Type (Active, Routine, Retrospective)

IDENTIFICATION

Health District: Province: Nearest Health Facility to Patient home:
Surname & Name: Father/Mother:
 Address: Town/City:
 Date of Birth: / / Age: years months Gender M=Male F=Female
(If DOB unknown / not entered) (only if < 1 yr old)

CLINICAL HISTORY

Date Onset of Paralysis / /
 Fever at onset of paralysis 1=Y, 2=N Paralysis progressed <=3 days 1=Y, 2=N
 Flaccid & sudden paralysis Asymmetrical
Site of Paralysis
 Left Arm Right Arm
 Left Leg Right Leg
1 = Y, 2 = N

Medical Diagnosis:

VACCINATION HISTORY:

Total OPV doses Exclude Birth dose OPV doses Birth / / 2nd / / 4th / /
 1st / / 3rd / / If >4, last OPV

NOTIFICATION/INVESTIGATION

Notified by: Tel Date Notified: / / Date Case Investigated: / /

HOSPITALIZATION

Admitted to hospital: 1=Yes 2=No Date of Admission: / /
 Medical Record No. Facility Name:

STOOL SPECIMENS

	Date Collected	Days after onset	Date Sent to Lab	Date Received by Lab	Lab Ref No	Stool Condition 1 = Adequate 2 = Not Adeq	P1	P2	P3	NP-Ent	W1	W2	W3	V1	V2	V3	Date Lab result to Prov & EPI (SA)	Date result Received at EPI (SA) or Province
Stool 1																		
Stool 2																		

(Results 1 = Yes = Positive 2 = No = Negative)

60 DAY FOLLOW UP EXAMINATION

Date follow up Examination: / / **Residual Paralysis?**
 Left Arm Right Arm
 Left Leg Right Leg
1=Y, 2=N Findings at follow-up: 1=Residual paralysis
 2=No residual paralysis
 3=Lost to follow-up
 4=Death before follow-up
 Date Died: / /

INVESTIGATOR

Name: Title: Facility: Phone:

PEC - FINAL CLASSIFICATION: [To be completed by EPI (SA)]

EPI (SA) Classification: True AFP? 1 = Confirmed 2 = Compatible
 3 = Discarded 6 = Not an AFP
 PEC Classification: Date PEC: 1=Yes, 2=No

Remarks:



Guidelines for collection, handling and transport of faecal samples for Acute Flaccid Paralysis (AFP) surveillance / poliovirus isolation

The NICD is the only laboratory within South Africa that is accredited by the WHO for poliovirus isolation. As a result, ALL samples for poliovirus isolation collected from cases or suspected cases of AFP MUST be forwarded to the NICD for testing. Sample quality and integrity is vital in order to maximize virus recovery from faecal material. This begins at the time of specimen collection and continues up to the point of receipt in the laboratory. Strict adherence to guidelines is essential to ensure that the integrity of the sample is not compromised.

Sample Collection

- Collect two stool/faecal samples, 24-48 hours apart, within 14 days of onset of paralysis. Samples must reach the NICD within 3 days of collection.
- Where stools cannot be obtained, a rectal swab must be submitted for testing.
- ALL sections of the appended laboratory / case investigation form for AFP surveillance must be completed and accompany specimens. The Provincial Department of Health office will assign an "Epid number".

Sample Handling

Upon collection, samples must immediately be placed in a vaccine carrier / cooler box with frozen ice-packs or in a refrigerator if available. Vaccine carriers / cooler boxes must be dedicated to samples for poliovirus isolation. The cold chain must be maintained at all times during storage and transit of samples. The first specimen may be refrigerated until the second specimen has been collected; however, if no refrigeration facility is available the sample must be immediately delivered to the NICD.

Transport of samples to NICD

- The NICD Receiving Office (telephone numbers below) MUST be informed that AFP specimens are being sent to ensure correct sample transport and tracking.
- Samples must be transported in a vaccine carrier / cooler box with frozen ice packs to the below address.

Receiving Laboratory

National Institute for Communicable Diseases (NICD)

1 Modderfontein Road

Sandringham

Gauteng, 2192

Tel: 011-386-6404 / 6314 / 6466

Referral of specimens from NHLS laboratories to NICD

For purposes of containment of poliovirus and maintenance of the cold chain, vaccine carriers / cooler boxes carrying samples for poliovirus isolation should not be handled / opened by the referral NHLS laboratories during the delivery process. For traceability purposes it is suggested that a referral logbook be created and all relevant information documented. All relevant NHLS staff should be trained on these procedures.