LEPTOSPIROSIS CASE INVESTIGATION REPORT  
(Human Infection)

Case No. ____________________________

I. PATIENT INFORMATION
First four letters of Patient's last name
Age
SEX
1  Male   2  Female
Address (County/State)
Occupation

II. CLINICAL DATA
Date of Onset ____________________________
Was patient hospitalized: Yes  □  No  □  Unk. □
Date of Admission ____________________________
Name of Hospital ____________________________
Date of Discharge or recovery
mo. day yr.  Death: Yes □  No □  Unk. □
Date of Death ____________________________
Autopsy: Yes □  No □
Name of attending physician: ____________________________

Initial clinical impression:

Leptospirosis □  Unknown □  Other, specify ____________________________

Presumptive serotype ____________________________

Signs and Symptoms:

(1) Renal involvement
   1. anuria or oliguria .............. □  □  □
   2. elevated BUN
      (over 20 mg. %) .............. □  □  □
   3. hematuria .............. □  □  □
   4. albuminuria
      (over "2+") .............. □  □  □

(2) Liver involvement
   jaundice .............. □  □  □

(3) Central nervous system involvement
   1. stiff neck .............. □  □  □
   2. elevated CSF protein
      (over 50 mg.%). .............. □  □  □
   3. elevated CSF cell count
      (over 5 cells per ml). .............. □  □  □

(4) Other manifestations:

III. EPIDEMIOLOGY

(1) Recent contact with animals: Yes □  No □  Unknown □
   1. Rodents □
   2. Dogs □
   3. Cattle □
   4. Swine □
   5. Wild animals □
   6. Other animals □

(2) Water. Recent history of contact in potentially contaminated water (i.e., sewage, streams, ponds, floods, etc.):

□  □  □

This report is authorized by law (Public Health Service Act, 42 USC 261). While your response is voluntary, your cooperation is necessary for the understanding and control of the disease.
FOR LEPTOSPIROSIS REFERENCE LABORATORY USE ONLY

(1) SEROLOGY (Agglutination Test)

<table>
<thead>
<tr>
<th>Serum Specimen Number:</th>
<th>(1) Leptospiral Antigens Tested</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>_____ day after onset</td>
<td>_____ day after onset</td>
<td>_____ day after onset</td>
<td>_____ day after onset</td>
</tr>
<tr>
<td></td>
<td>ST</td>
<td>MA</td>
<td>ST</td>
<td>MA</td>
</tr>
</tbody>
</table>

1. ballum
2. canicola
3.icterohaemorrhagiae
4. batariae
5. grippotyphosa
6. pyogenes
7. autumnalis
8. pomona
9. woffli
10. australis
11. tarassovi
12. georgis
13. Other

Other Serologic Tests Performed:

<table>
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<tr>
<th>Yes</th>
<th>No</th>
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</thead>
</table>

Abbreviations:
MA — microscopic agglutination with live antigen
ST — macroscopic slide agglutination test
HL — Hemolytic test
FA — Fluorescent Antibody test

(2) DIRECT CULTURE (3) ANIMAL INOCULATION (4) DEMONSTRATIONS OF ORGANISMS

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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Blood
Urine
Tissue
Other

Leptospire isolated: 1 Yes 2 No 3 Unk.

Seroype isolated

CDC 52.25 (1.4.173)
REV. 10-87
IV. LABORATORY EVIDENCE OF LEPTOSPIRAL INFECTION (other than Leptospirosis Reference Laboratory)

Name of Laboratory

Location

(1) Serology:

Specimens examined: 1 □ Yes 2 □ No

For specimens examined:

<table>
<thead>
<tr>
<th>Type of Test</th>
<th>Antigens Used</th>
<th>Dates and Titers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Mo. Day Yr.</td>
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</tbody>
</table>

(2) Culture:

Material cultured ____________________________ Date __________

Animals inoculated __________________________

Results __________________________

(3) Direct examination:

Material examined __________________________

Method: Darkfield 1 □  Fluorescent antibody 2 □  Histopathology 3 □

Results __________________________

Signature __________________________ Date __________