Cyanobacteria can produce toxins that adversely affect human and animal health.

Health effects depend on:
- Route of exposure (dermal, ingestion, inhalation)
- Amount of toxin
Onset of symptoms can take a few minutes up to days after exposure.

Signs and Symptoms:
- Nausea
- Vomiting
- Diarrhea
- Cough
- Sore throat
- Rash
- Liver damage
- Death (animals)
Human and Animal Illness Complaint Form

Human Algae Illness Reporting Form

Please use this form to report a human illness or death that you think was related to

nepoforms@kdhksa.org. Thank you for reporting this incident to us. We are working

Please enter today's date:

mm/dd/yyyy: mm/dd/yyyy

Please enter the name and address of the person completing the form:

Name:

Street Address:

City:

State: KANSAS

Zip:

Please select citizen type that describes you best:

How can we contact you for follow-up?

Enter at least 1 response:

Home or cell phone:

Work phone:

Email address:

Please enter the name and contact information of the person who became ill:

Name:

Street Address:

City:

State: KANSAS

Zip:

Home or cell phone:

Please provide the age of the individual who was exposed.

Age:

Animal Illness Reporting Form

Please use this form to report an animal illness or death that you think was related to exposure to blue

informatics at 877-427-7317 or email epilines@kdhksa.org. Thank you for reporting this incident to us:

Please enter today's date:

mm/dd/yyyy: mm/dd/yyyy

Please enter the name and address of the person completing the form:

Name:

Street Address:

City:

State: KANSAS

Zip:

Contact phone number:

Email address:

Please select citizen type that describes you best:

Citizen

Healthcare Provider

State Agency

County Agency

Poison Control Center

Biologist

Veterinarian

Other:

Please enter the name and contact information of the owner of the animal that became ill or expired if known.

Name:

Street Address:

City:

State:

Zip:

Home or cell phone:

Please provide the age of the animal that was exposed.

Age:
# Human and Animal Interview Form

## HAB-Related Human Illness Report

**Identifying Information for suspected case:**
- Name:
- Age:
- Date of birth:
- Address:
- City:
- State:
- Zip code:
- Phone number:
- Other contact information:

**Source of report:**
- Close contact
- Other:

**Exposure Information:**
- Time of exposure:
- Duration of exposure:
- Activity at time of exposure:
- Alcoholic intoxication:
- Medication:
- Tobacco use:

**Environmental Conditions:**
- Location:
- Conditions:

**If source was food:**
- Type of food:
- Prepared by:
- Location of preparation:

## HAB-Related Animal Illness Event Report

**Identifying Information for animal caller:**
- Name:
- Address:
- City:
- State:
- Zip code:
- Phone number:
- Other contact information:

**Source of report:**
- Other:

**Animal Description:**
- Species:
- Sex:
- Age:

**Exposure Information:**
- Date of exposure:
- Location of exposure:
- Activity during exposure:

**Environmental Conditions:**
- Location:
- Conditions:

---

To protect and improve the health and environment of all Kansans.
# Human and Animal Illness Case Classification

To protect and improve the health and environment of all Kansans

<table>
<thead>
<tr>
<th>Definition</th>
<th>Exposure¹</th>
<th>Signs/symptoms²</th>
<th>Public health assessment³</th>
<th>Professional medical diagnosis⁴</th>
<th>Other causes of illness ruled out</th>
<th>Observational or environmental data⁵</th>
<th>Laboratory-based HAB data⁶</th>
<th>Clinical data⁷</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Human HAB-associated Case</strong></td>
<td></td>
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<td></td>
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</tbody>
</table>
Complaint # 1  
Date of Exposure: 7/7/2018  
Lake: Webster Lake  
Age Group: Adult  
Details: Individual was boating at Webster Lake and had dermal contact with water from water splashing into boat. Experienced fatigue, loss of appetite, headache, sore throat, nausea, diarrhea, vomiting, and weakness. Had medical treatment, no lab explanation for illness. Individual unsure if symptoms began before or after exposure to the water. This lake did have an associated HAB at time individual was there, but the temporal time line for exposure and symptoms is unclear.  
Case Classification: Not a case
Complaint # 2  
Date of Exposure: 8/27/2018  
Lake: Lake Afton  
Age Group: Adult  

Details: Individual was at Lake Afton and 30-45 minutes after being at lake began to experience fatigue, sore throat, cough, and chest tightness. Did not have dermal contact with water, but it was very windy on this day and believes toxins may have been inhaled. Sought medical attention, impression from physician was that it was HAB-related. There was a HAB associated with this lake at the time of exposure.  

Case Classification: Probable
Complaint # 1
Date of Exposure: 7/18/2018
Lake: Frazier Lake
Age Group: Puppy
Animal: Dog

Details: Puppy had dermal contact with water and possibly ingested. Puppy began experiencing lethargy, loss of appetite, vomiting, and diarrhea a couple of hours after exposure. Symptoms lasted about 24 hours until death. Vet did not release any information on testing done. There was a HAB associated with this lake at the time of exposure.

Case Classification: Probable
## 4-Year Statistics, Human and Animal Cases

<table>
<thead>
<tr>
<th>Case Classification</th>
<th>2018 Count</th>
<th>2017 Count</th>
<th>2016 Count</th>
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<td>3</td>
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</tbody>
</table>
Division of Public Health

Questions?

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