



**BOARD OF SUPERVISORS AGENDA ITEM REPORT**  
**CONTRACTS / AWARDS / GRANTS**

Requested Board Meeting Date: 02 August 2016

or Procurement Director Award ☐

**Contractor/Vendor Name (DBA):** Arizona Board of Regents, University of Arizona

**Project Title/Description:**

Zika Virus Reporting and Identification Call Center

**Purpose:**

To provide 24 hours a day / 7-days a week contact for citizens in Pima County and healthcare providers, reporting travel related exposures to Zika virus and requiring evaluation for testing.

**Procurement Method:**

IGA

**Program Goals/Predicted Outcomes:**

Provision of a telephone reporting line with live trained healthcare professionals to receive calls from healthcare providers and the public to provide general county specific information for vector-borne disease, accept vector-borne disease reports from healthcare providers, and assess individuals for travel exposure to Zika virus. Reports will be transmitted to Pima County Health Department Epidemiology via regular or after-hours telephone, fax, and/or secure email. The phone line will be staffed by trained healthcare professionals available 24 hours a day, seven days a week.

**Public Benefit:**

Access to a 24/7 healthcare professional to offer relevant healthcare information, evaluate travel exposure, assess symptoms and make recommendations for vector-borne disease and Zika virus testing.

**Metrics Available to Measure Performance:**

Arizona Poison and Drug Information Center will provide a telephone number to Pima County Health Department, that will be public facing and available 24/7 for Zika and vector-borne disease information. Arizona Poison and Drug Information Center will develop, maintain, and provide a spreadsheet documenting each call received, action taken, notification to appropriate agency and additional information as required. Arizona Poison and Drug Information center will report data weekly, to Pima County Health Department Epidemiology, in addition to providing real-time and immediate notifications of positive screens for Zika virus.

**Retroactive:**

Yes, closest BOS meeting date to agreement commencement.

To: CoB. 7-15-16 (2)  
Ver. - 1  
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Procure Dept 07/13/16 PM12:19

**Original Information**

Document Type: CT Department Code: HD Contract Number (i.e., 15-123): 17-004  
Effective Date: 08/01/2016 Termination Date: 07/31/2017 Prior Contract Number (Synergen/CMS): N/A  
☒ Expense Amount: \$ 49,900.00 ☐ Revenue Amount: \$ \_\_\_\_\_  
Funding Source(s): ADHS Public Health Emergency Preparedness Grant

Cost to Pima County General Fund: \$0.00

Contract is fully or partially funded with Federal Funds? ☒ Yes ☐ No ☐ Not Applicable to Grant Awards  
Were insurance or indemnity clauses modified? ☒ Yes ☐ No ☐ Not Applicable to Grant Awards  
Vendor is using a Social Security Number? ☐ Yes ☒ No ☐ Not Applicable to Grant Awards

If Yes, attach the required form per Administrative Procedure 22-73.

**Amendment Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_  
Amendment No.: \_\_\_\_\_ AMS Version No.: \_\_\_\_\_  
Effective Date: \_\_\_\_\_ New Termination Date: \_\_\_\_\_  
☐ Expense ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ \_\_\_\_\_  
Funding Source(s): \_\_\_\_\_

Cost to Pima County General Fund: \_\_\_\_\_

Contact: Chasity Herrington

Department: Health

Telephone: 520-724-7947

Department Director Signature/Date: \_\_\_\_\_

Deputy County Administrator Signature/Date: \_\_\_\_\_

County Administrator Signature/Date: \_\_\_\_\_

(Required for Board Agenda/Addendum Items)

*[Handwritten signatures and dates]*  
11 July 16  
July 12, 2016  
C. Dulcetany 7/13/16

**INTERGOVERNMENTAL AGREEMENT  
BETWEEN PIMA COUNTY HEALTH DEPARTMENT  
AND ARIZONA BOARD OF REGENTS, UNIVERSITY OF ARIZONA**

Project: Zika Virus Reporting and Identification Call Center

Sponsors:

**PIMA COUNTY**

Pima County Health Department  
Public Health Emergency Preparedness  
3950 S. Country Club Road Suite 2354  
Tucson, Arizona 85714

**UNIVERSITY**

University of Arizona  
Sponsored Projects Services  
PO Box 210158, Rm 510  
Tucson, AZ 85721-0158

Term: August 1, 2016 to July 31, 2017

Amount: \$49,900.00

This is an Intergovernmental Agreement ("Agreement") entered between Pima County, a political subdivision of the State of Arizona, ("County"), and Arizona Board of Regents, University of Arizona, ("University") for the purpose of entering into a cooperative effort for the provision of call center services for vector-borne disease and Zika virus assessments.

WHEREAS, in accordance with A.R.S. § 11-952, County is authorized to enter into agreements with other public entities for joint cooperative actions;

WHEREAS, County seeks to create a public facing phone line managed by healthcare professionals to screen public for Zika and vector-borne disease testing;

WHEREAS, University operates the Arizona Poison and Drug Information Center, a public facing healthcare provider managed call center;

WHEREAS, County desires to provide funding to University for management of a public facing phone line to assess exposure to Zika and other vector-borne diseases; and

WHEREAS, County and University desire to enter into an agreement to develop public infrastructure to monitor and evaluate exposures to Zika and vector-borne diseases purpose of public health surveillance in Pima County.

NOW, THEREFORE, the parties agree to enter into an Agreement as follows:

**ARTICLE I - TERM/EXTENSION/MODIFICATION**

- A. This Agreement shall commence on August 1, 2016, and shall terminate on July 31, 2017, unless sooner terminated pursuant to the provisions of this Agreement. The parties shall have the option of extending this agreement for four (4) additional one (1) year periods if funding is identified. Any modification shall be by formal written amendment executed by both the parties hereto.
- B. Amendments to this Agreement must be approved by the County Board of Supervisors, as required by the Pima County Procurement Code, before any work or deliveries under the amendment commences.

|   |  |
|---|--|
| <b>CONTRACT</b>   |  |
| NO. <u>CT-HD-17-004</u>   |  |
| AMENDMENT NO. _____   |  |
| This number must appear on all<br>invoices, correspondence and<br>documents pertaining to this<br>contract. |  |



## **ARTICLE II - SCOPE OF WORK/SERVICES**

- A. This Agreement establishes the responsibilities of the parties for delivery of research, strategies, and infrastructure to use social media to monitor topics for the purpose of public health surveillance as specified in **Exhibit A: Scope of Work** (4 pages), which is attached hereto and expressly incorporated into and made a part of this Agreement.
- B. University will perform the work in accordance with the terms of the Agreement and to the best of University's ability. University will employ suitably trained and skilled professional personnel to perform all services under this Agreement.

## **ARTICLE III- PAYMENT**

- A. In consideration of the services specified in this Agreement, County agrees to pay University in an amount not to exceed \$49,900.00 for the entire term. University shall be paid on a Unit Cost basis, upon completion of the following Deliverables, in accordance to the following:
  - 1. Project Kickoff, University may invoice County for \$24,950.00 (50% of the total budget) as of August 1, 2016 or upon execution of this Agreement.
  - 2. Project Implementation, University may invoice County for \$24,950.00 (50% of the total budget) as of January 1, 2017.
- B. If the Agreement is extended beyond the initial term, the annual do not exceed amount is anticipated to be no more than \$49,900.00, dependent on grant funding received.
- C. Funding is from the Centers for Disease Control (CDC) by way of the Arizona Department of Health Services (ADHS), Public Health Emergency Preparedness Fund. Only grant funds will be used for compensation and payments advanced to University.
- D. To request payments, University must:
  - 1. Submit an invoice to County for services provided in accordance to Exhibit A: Scope of Work.
  - 2. Invoice(s) must include University's name and address, Invoice Date, Invoice Number, Date of Service, and Total Amount being billed.

## **ARTICLE IV – INSURANCE**

University is self-insured under A.R.S. § 41-621 et. seq. This Program maintains general and professional liability coverage of sufficient amounts to cover claims arising from the acts and omissions of Subrecipient's employees while participating in this Agreement.

## **ARTICLE V - INDEMNIFICATION**

Each party (as "Indemnitor") agrees to defend, indemnify, and hold harmless the other party (as "Indemnitee") from and against any and all claims, losses, liability, costs, or expenses (including reasonable attorney's fees) (hereinafter collectively referred to as "Claims") arising out of bodily injury of any person (including death) or property damage, but only to the extent that such Claims which result in vicarious/derivative liability to the Indemnitee are caused by the act, omission, negligence, misconduct, or other fault of the Indemnitor, its officers, officials, agents, employees, or volunteers.

#### **ARTICLE VI - COMPLIANCE WITH LAWS**

- A. University shall comply with all federal, state and local laws, rules, regulations, standards and Executive Orders, without limitation to those designated within this Agreement. The laws and regulations of the State of Arizona shall govern the rights of the parties, the performance of this Agreement and any disputes hereunder. In the event of litigation, as required by A.R.S. § 12-1518, the parties agree to make use of arbitration in all contracts that are subject to mandatory arbitration pursuant to rules adopted under A.R.S. § 12-133. Any action relating to this Agreement shall be brought in an Arizona court in Pima County. Any changes in the governing laws, rules and regulations during the terms of this Agreement shall apply but do not require an amendment.
- B. In addition, each party shall comply with the confidentiality restrictions imposed upon the other party by the Health Insurance Portability & Accountability Act (HIPAA) and Family Educational Rights and Privacy Act (FERPA). Each party acknowledges that these confidentiality limitations may restrict the sharing of constituent/patient information between the parties.

#### **ARTICLE VII - INDEPENDENT CONTRACTOR**

The status of University is that of an independent contractor. Neither University, nor its officers, agents or employees, will be considered an employee of Pima County or be entitled to receive any employment-related fringe benefits under the Pima County Merit System. University is responsible for payment of all federal, state and local taxes associated with the compensation received pursuant to this Agreement and will indemnify and hold County harmless from any and all liability which County may incur because of University's failure to pay such taxes. University is solely responsible for program development and operation.

#### **ARTICLE VIII - SUBCONTRACTORS**

University will be fully responsible for all acts and omissions of any subcontractor and of persons directly or indirectly employed by any subcontractor and of persons for whose acts any of them may be liable to the same extent that the University is responsible for the acts and omissions of persons directly employed by it. Nothing in this Agreement creates any obligation on the part of County to pay or see to the payment of any money due any subcontractor, except as may be required by law.

#### **ARTICLE IX - ASSIGNMENT**

University may not assign its rights to this Agreement, in whole or in part, without prior written approval of County. County may withhold approval at its sole discretion, provided that County will not unreasonably withhold such approval.

#### **ARTICLE X - NON-DISCRIMINATION**

University agrees to comply with all provisions and requirements of Arizona Executive Order 2009-09 which is hereby incorporated into this Agreement as if set forth in full herein **including flow down of all provisions and requirements to any subcontractors**. During the performance of this Agreement, University will not discriminate against any employee, client or any other individual in any way because of that person's age, race, creed, color, religion, sex, disability or national origin.

#### **ARTICLE XI - AMERICANS WITH DISABILITIES ACT**

University will comply with all applicable provisions of the Americans with Disabilities Act (Public Law 101-336, 42 U.S.C. 12101-12213) and all applicable federal regulations under the Act, including 28 CFR Parts 35 and 36.



## **ARTICLE XII - AUTHORITY TO CONTRACT**

University warrants its right and power to enter into this Agreement. If any court or administrative agency determines that County does not have authority to enter into this Agreement, County will not be liable to University or any third party by reason of such determination or by reason of this Agreement.

## **ARTICLE XIII - FULL AND COMPLETE PERFORMANCE**

The failure of either party to insist on one or more instances upon the full and complete performance of any of the terms or conditions of this Agreement to be performed on the part of the other, or to take any action permitted as a result thereof, is not a waiver or relinquishment of the right to insist upon full and complete performance of the same, or any other covenant or condition, either in the past or in the future. The acceptance by either party of sums less than may be due and owing it at any time is not an accord and satisfaction.

## **ARTICLE XIV - CANCELLATION FOR CONFLICT OF INTEREST**

This Agreement is subject to cancellation for conflict of interest pursuant to ARS § 38-511, the pertinent provisions of which are incorporated into this Agreement by reference.

## **ARTICLE XV - TERMINATION**

County reserves the right to terminate this Agreement at any time and without cause by serving upon University thirty (30) days advance written notice of such intent to terminate. In the event of such termination, County's only obligation to University will be payment for services rendered prior to the date of termination.

This Agreement may be terminated at any time without advance notice and without further obligation to County if University is found by County to be in default of any provision of this Agreement.

Notwithstanding any other provision in this Agreement, this Agreement may be terminated if for any reason, there are not sufficient appropriated and available monies for the purpose of maintaining County or other public entity obligations under this Agreement. In the event of such termination, County will have no further obligation to University, other than to pay for services rendered prior to termination.

## **ARTICLE XVI – NOTICES**

Any notice required or permitted to be given under this Agreement shall be in writing and shall be served by delivery or by certified mail upon the other party as follows:

### **COUNTY:**

Health Department PHEP  
Louie Valenzuela  
3950 S. Country Club Rd.  
Suite 100  
Tucson, Arizona 85714  
Phone: 520-724-7749

### **CONTRACTOR:**

Arizona Poison and Drug Information Center  
Keith Boesen, PharmD,  
CSPI Director  
1295 N. Martin Ave. Suite B308  
Tucson, AZ 85721  
Phone 520-626-6230

## **ARTICLE XVII - NON-EXCLUSIVE CONTRACT**

University understands that this Agreement is nonexclusive and is for the sole convenience of County. County reserves the right to obtain like services from other sources for any reason.

#### **ARTICLE XVIII – OTHER DOCUMENTS / GRANT COMPLIANCE**

University is a subcontractor to County under the Arizona Department of Health Services' Public Health Emergency Preparedness Grant, of which the terms and conditions of the grant are expressly made part of this Agreement as if set forth in full herein.

#### **ARTICLE XIX - REMEDIES**

Either party may pursue any remedies provided by law for the breach of this Agreement. No right or remedy is intended to be exclusive of any other right or remedy and each is cumulative and in addition to any other right or remedy existing at law or at equity or by virtue of this Agreement.

#### **ARTICLE XX – SEVERABILITY**

If any provision of this Agreement is held to be invalid or unenforceable, the remaining provisions shall continue to be valid and enforceable to the full extent permitted by law.

#### **ARTICLE XXI - NON-APPROPRIATION**

The performance of both Parties may be dependent upon the appropriation of funds by each Party's governing, legislative authority. Should the Legislature in the case of University or the Board of Supervisors in the case of County fail to appropriate the necessary funds or if either Party's applicable appropriation is reduced during the fiscal year, the Party that is subject to the reduced or eliminated funding may reduce the scope of this Agreement if appropriate or cancel this Agreement without further duty or obligation. Each Party agrees to notify the other Party as soon as reasonably possible after the unavailability of said funds comes to its attention.

#### **ARTICLE XXII - NO JOINT VENTURE**

It is not intended by this Intergovernmental Agreement to, and nothing contained in this Intergovernmental Agreement shall be construed to, create any partnership, joint venture or employment relationship between the parties or create any employer-employee relationship between either party and the other party's employees. Neither party shall be liable for any debts, accounts, obligations nor other liabilities whatsoever of the other, including (without limitation) the other party's obligation to withhold Social Security and income taxes for itself or any of its employees.

#### **ARTICLE XXIII - NO THIRD PARTY BENEFICIARIES**

Nothing in the provisions of this Agreement is intended to create duties or obligations to or rights in third parties not parties to this Agreement or affect the legal liability of either party to the Agreement by imposing any standard of care different from the standard of care imposed by law.

#### **ARTICLE XXIV – LEGAL ARIZONA WORKERS ACT COMPLIANCE**

University hereby warrants that it will at all times during the term of this Agreement comply with all federal immigration laws applicable to University's employment of its employees, and with the requirements of A.R.S. § 23-214 (A) (together the "State and Federal Immigration Laws"). University will further ensure that each subcontractor who performs any work for University under this Agreement likewise complies with the State and Federal Immigration Laws.

County has the right at any time to inspect the books and records of University and any subcontractor in order to verify such party's compliance with the State and Federal Immigration Laws.

Any breach of University's or any subcontractor's warranty of compliance with the State and Federal Immigration Laws, or of any other provision of this section, is a material breach of this Agreement subjecting University to penalties up to and including suspension or termination of this Agreement. If the breach is by a subcontractor, and the subcontract is suspended or terminated as a result, University will be required to take such steps as may be necessary to either self-perform the services that would have been provided under the subcontract or retain a replacement subcontractor, as soon as possible so as not to delay project completion.

University will advise each subcontractor of County's rights, and the subcontractor's obligations, under this Article by including a provision in each subcontract substantially in the following form:

"SUBCONTRACTOR hereby warrants that it will at all times during the term of this contract comply with all federal immigration laws applicable to SUBCONTRACTOR's employees, and with the requirements of A.R.S. § 23-214 (A). SUBCONTRACTOR further agrees that County may inspect the SUBCONTRACTOR'S books and records to insure that SUBCONTRACTOR is in compliance with these requirements. Any breach of this paragraph by SUBCONTRACTOR is a material breach of this contract subjecting SUBCONTRACTOR to penalties up to and including suspension or termination of this contract."

Any additional costs attributable directly or indirectly to remedial action under this Article will be the responsibility of University. In the event that remedial action under this Article results in delay to one or more tasks on the critical path of University's approved construction or critical milestones schedule, such period of delay will be excusable delay for which University will be entitled to an extension of time, but not costs.

#### **ARTICLE XXV – ISRAEL BOYCOTT CERTIFICATION**

University hereby certifies that it is not currently engaged in, and will not for the duration of this Agreement engage in, a boycott of Israel as defined by A.R.S. § 35-393.01. Violation of this certification by University may result in action by County up to and including termination of this Agreement.

#### **ARTICLE XXVI - ENTIRE AGREEMENT**

This document constitutes the entire agreement between the parties pertaining to the subject matter hereof, and all prior or contemporaneous agreements and understandings, oral or written, are hereby superseded and merged herein. This Agreement may be modified, amended, altered or extended only by a written amendment signed by the parties.

**THE REMAINDER OF THIS PAGE INTENTIONALLY LEFT BLANK**



IN WITNESS THEREOF, the parties have affixed their signatures to this Agreement on the dates written below.

**PIMA COUNTY**

\_\_\_\_\_  
Chair, Board of Supervisors


\_\_\_\_\_  
Date

**ATTEST**

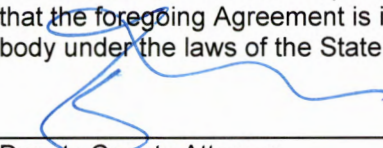
\_\_\_\_\_  
Clerk of the Board

\_\_\_\_\_  
Date

**APPROVED AS TO CONTENT**

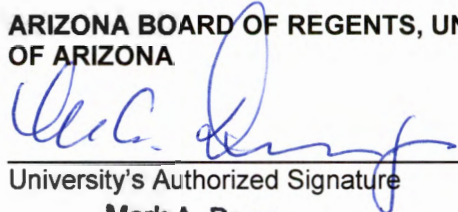
  
\_\_\_\_\_  
Health Department Director

**APPROVED AS TO FORM** pursuant to A.R.S. § 11-952(D), the attorneys for the parties hereto have determined that the foregoing Agreement is in proper form and is within the powers and authority granted to each respective body under the laws of the State of Arizona.

  
\_\_\_\_\_  
Deputy County Attorney

6/23/16  
Date

**ARIZONA BOARD OF REGENTS, UNIVERSITY OF ARIZONA**

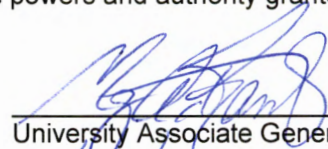
  
\_\_\_\_\_  
University's Authorized Signature

**Mark A. Drury**

~~Contracts Manager~~  
\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Title (please print)

7/13/2016  
Date

  
\_\_\_\_\_  
University Associate General Counsel

7/12/16  
Date

## **Exhibit A: SCOPE OF WORK**

### **Background**

Resources for this contract are a Federal Pass-through provided to Pima County Health Department (PCHD) by Arizona Department of Health Services (ADHS), ADHS Contract # ADHS12-007894 (later renumbered to ADHS15-096707 and then ADHS16-100124) and ADHS17-133197. The agreements above are funded through the Centers for Disease Control (CDC) and include an Ebola Phase 2 Supplemental Grant Award. ADHS has obtained permission to use remaining funds allocated for Ebola for activities related to the Zika virus. All Federal grant regulations apply to the administration of these funds.

This contract supports PCHD performance of the following capabilities under the Public Health Preparedness (PHEP) Cooperative Agreement with the Centers for Disease Control and Prevention: Capability 4: Emergency Public Information and Warning, Capability 6: Information Sharing, Capability 8: Medical Countermeasure Dispensing, Capability 10: Medical Surge, Capability 11: Non-Pharmaceutical Interventions, Capability 13: Public Health Surveillance and Epidemiological Investigation, Capability 14: Responder Safety and Health.

### **Program Activities**

#### **24-Hour Public Health Emergency and Vector-Borne Disease Reporting and Response Line**

The purpose for this line of service is to provide 24/7 contact for Pima County healthcare providers, and the public, reporting the occurrence of vector-borne diseases of public health concern or other emergency situations requiring a public health response. Distribution of the phone number associated with this service will be public facing.

#### **A. Scope of Work:**

On behalf of Pima County Health Department, Arizona Poison and Drug Information Center and MotherToBaby AZ will staff and maintain a telephone reporting line with live trained healthcare professionals to receive calls from healthcare providers and the public to provide county specific information for vector-borne disease, accept vector-borne disease reports from healthcare providers, and assess individuals' risk for exposure to Zika virus/vector borne disease. These reports will be transmitted to designated Pima County Health Department staff via regular or after-hour telephone numbers, fax, or secure email, as specified in section D. The line will be staffed by at least one live trained healthcare professional available to answer calls 24 hours a day, seven (7) days a week. The reporting line will be advertised to both the general public and local healthcare providers. The reporting line may be utilized more broadly in the event of a public health emergency.

#### **B. Hours of Operation:**

24-hours a day; seven (7) days a week.

#### **C. Pima County Health Department will:**

1. Publicize dedicated 24/7 telephone number(s) that is to be available to the public and health care providers.
2. Provide to the Arizona Poison and Drug Information Center, telephone contact numbers for Pima County public health personnel and backup personnel to ensure the transfer of pre-identified reports or inquiries needing immediate attention.

3. Provide 24-hour Reporting System protocol.
4. Provide vector-borne disease training to Arizona Poison and Drug Information Center staff (as needed).
5. Prohibit the release for publication of any material relative to the performance of this Contract without prior written approval by both parties.
6. Provide regular updates of activities that might generate calls for the reporting line.

**D. University will:**

1. Train all staff members who will be staffing the line. Training content will specifically involve the assessment of risk for vector-borne illness.
2. Receive telephone calls from healthcare providers, first responders, laboratories, other public health agencies, community partners, and the public 24-hours a day, seven (7) days a week regarding vector-borne disease reporting, Zika exposure evaluations, and/or other public health emergencies.
3. Provide telephone system and incoming lines based on the above scope of work.
4. Immediate and real-time transfer of positive vector-borne disease screens and/or reports to Pima County Health Department Epidemiology program.
5. Develop, maintain, and provide a spreadsheet documenting each call received, action taken, notification to appropriate agency/party and additional information as required (e.g. Sample Zika Travel and Risk Assessment Questionnaire).
6. Data reporting frequency: Weekly, submit call log spreadsheet and, upon request, copies of all records documenting each report logged and calls received using the agreed upon method. Provide real-time and immediate notification of positive screens for vector-borne disease.
7. Staff will attend epidemiology and surveillance meetings as necessary. Attendance at meetings is included at no additional cost to the County.
8. Staff will attend trainings as applicable to performance of contract requirements at no additional cost to the County.
9. MotherToBaby AZ will provide specific information and guidance on identification, education, and counseling for the effects of Zika on reproductive age individuals.

**Reports**

University shall complete and submit the following:

1. Deliverable 1 – Provide telephone number and incoming lines to receive calls for vector-borne disease evaluation and reporting, 24-hours a day, seven (7) days a week.
2. Deliverable 2 - Develop, maintain, and provide a spreadsheet documenting each call received, action taken, notification to appropriate agency/party and additional information as required per the Zika Travel and Risk Assessment Questionnaire. Submit weekly reports of spreadsheet and/or progress report, with all requested materials to Pima County Health Department Public Health Emergency Preparedness Program.
3. Deliverable 3 – Immediate and real-time transfer of positive vector-borne disease screens and/or reports to Pima County Health Department Epidemiology program (520-724-7797).

**Compensation/Rate of Pay**

University shall be paid on a Unit Cost basis, subject to availability of funds, upon completion of the services specified in this scope, in accordance to the following:



1. Project Kickoff, University may invoice County for \$24,950.00 (50% of the total budget) as of August 1, 2016 or upon execution of this contract.
2. Project Implementation, University may invoice County for \$24,950.00 (50% of the total budget) as of January 1, 2017.

**Payment Schedule**

In consideration of the services specified, the University will bill the County for an annual total of \$49,900 in accordance with the schedule below:

| <u>DATE</u>     | <u>AMOUNT</u>             |
|-----------------|---------------------------|
| August 1, 2016  | \$24,950.00               |
| January 1, 2017 | \$24,950.00               |
| <b>TOTAL</b>    | <b><u>\$49,900.00</u></b> |

**Send all invoices to the following address:**

Pima County  
Public Health Emergency Preparedness  
3950 S. Country Club Road, Suite 100  
Tucson, Arizona 85714  
Phone: 520-724-7749

## **QUESTIONNAIRE**

### **Zika Travel History and Risk Assessment**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_

#### **Travel History**

1. Location of travel (City, State, Country, etc. Be as specific as possible)
  2. Dates of travel
  3. Time spent in (each) location
  4. Were you bitten by mosquitos? Yes/No
    - a. Number of bites:
  5. Have you had any of the following symptoms during or within 2 weeks after travel?
    - a. Rash: maculopapular; diffuse (bilateral, symmetric, not localized) : Yes / No
    - b. Fever: low-grade (37.8 to 38.5°C); acute onset: Yes / No
    - c. Conjunctivitis (red eyes): nonpurulent (without draining pus) : Yes / No
    - d. Joint pain (arthralgia or arthritis): notably of the small joints of the hands and feet: Yes / No
    - e. Myalgias (muscle pains) : Yes / No
    - f. Headache: Yes / No
    - g. Retro-orbital pain: Yes / No
    - h. Fatigue: Yes / No
    - i. Gastrointestinal symptoms (eg, abdominal pain, nausea, vomiting, diarrhea): Yes / No
    - j. Upper respiratory tract infection symptoms (eg, runny nose; postnasal drip; nasal congestion; sore throat): Yes / No
    - k. Neurological symptoms (HA, Light sensitivity, weakness) (Yes/No)
  6. When did the symptoms start?
  7. How long did the symptoms last?
  8. Did you come into contact with sick/ill individuals in your travels? What illnesses did they have?
  9. How can we re-contact you in the future? Phone number
  10. Alternate contact?
- 

#### **For reproductive age women (age 12-49):**

1. Are you currently planning a pregnancy?
2. If no, what form of contraception are you using?
3. Are you currently pregnant? If pregnant, LMP or EDC.
4. Have you had an ultrasound in this pregnancy? When and at what gestational age?
5. Who is your prenatal care provider? Name/number: Are they aware of your recent travel?
6. Has your partner recently traveled to areas with the Zika virus?
7. Did you receive information about preventing mosquito bites before or during travel?
8. Did you use insect repellent? If so, what kind?
9. Have you had a blood test for the Zika virus? If so, what were the results?
10. Can we re-contact you in the future?