



Respiratory Outbreak 24 Hour Case Listing Report

Fax daily updates by 10:00 am to Public Health at **780.342.0248 and** SL, HL/SL shared sites fax to 780.735.3389 HL only sites fax to appropriate HL Network Office Submit report daily for both Newly Symptomatic cases, and when no new cases have been identified.

	El (Outbreak) Number							
е	Report Start Date (dd-Mon-yyyy) 0700 am							
	Report End Date (dd-Mon-yyyy) 0700 am							
	☐ There have been no new cases in this time period ☐ This report contains newly symptomatic cases							

Facility Name/Unit	Contact p	Contact person at Facility							Facility Phone Number							
Number of newly symptomatic Residents in the last 24 hours					Cumulative Number of symptomatic Residents since start of outbreak											
Number of newly symptomatic Staff in	Cumulative Number of symptomatic Staff since start of outbreak															
Demographic Information (Residents only, Do not include Staff Demographics)														Vaccine		
					Check all that appl											
Last Name, First Name		Date of Birth	Gender M/F	Unit/ Wing	Onset Date (dd-Mon-yyyy)	New Cough or change in cough	Fever	Sore Throat	Myalgia	Arthralgia	Prostration	Other	Has NP Swab been sent? Y/N	Date of Influenza Immunization (dd-Mon-yyyy)		
Outcome - Update on Hospitalizations or Deaths of Above or Previously Reported III Residents																
Last Name, First Name	e, First Name PHN/ULI Date of Birth (dd-Mon-yyyy)		Gender	Unit/ Wing	Name of Hosp	pital	Date Admitted (dd-Mon-yyyy)				Cause of Death			Date of Death (dd-Mon-yyyy)		

Respiratory Outbreak Case Listing Guidelines

Case Definition of ILI

New Cough, or changes in existing cough plus one or more of the following:

- Fever
- Sore Throat
- Myalgia
- Arthralgia
- Prostration

How to complete a Case Listing during an Outbreak

- 1. The first case listing submitted should include the details for **all** cases identified since the onset of the outbreak. Subsequent case listings should include only new ILI cases that meet the definition for the previous 24 hour period. (Reporting period is between 0700 am the previous day to 0700 am the day the report is submitted).
- 2. Complete the case listing record. Include:
 - El (Outbreak) Number
 - Dates of reporting period
 - Indicate if the report contains newly symptomatic cases, or if there have been no new cases within the time period
 - Facility Name
 - Contact information for Facility
 - Record number of newly symptomatic residents and newly symptomatic staff
 - Record cumulative number of symptomatic residents and symptomatic staff
 - Complete Demographics, Signs and Symptoms, Lab work and Vaccine information for Residents only. (Do not include this
 information for staff cases)
 - Include information or updates regarding related hospitalizations and/or deaths on any residents reported or previously reported.
- 3. Fax the daily case listing to Public Health by 1000 AM every day, including weekends and holidays for as long as the outbreak is ongoing. (Please ensure that the fax has been sent successfully e.g. obtain a 'confirmation of transmission' record from your fax machine).
- 4. SL, HL/SL shared sites must fax a copy to 780-735-3389 and HL only sites must fax a copy to the appropriate HL Network office.
- 5. Discontinue daily faxing of case listings when it has been confirmed (by telephone) with Public Health that the outbreak is closed