GASTROENTERITIS CASE LOG

County _____   Facility _____   Outbreak (yyyy-###) ___

Setting of Exposure: _____ Day Care Center   _____ School   _____ Nursing home or similar setting   _____ Other

List all preschoolers, students, residents, and staff with any gastrointestinal illness	age	sex	preschooler, student, resident, or staff	room #, grade/class	job duty code (staff only)	ONSET first vomiting or diarrhea		nausea	vomiting	diarrhea	3+ loose stools in 24 hr	documented fever only	cramps		duration of V or D	#days of school, preschool, or work missed*	seen by MD	sent to ER	hospitalized overnight	died
name	years	F or M	codes below		see below	date (m/d)	am pm	N	V	D	3	F	C		hours	days	P	E	H	X
Mary Q	83	F	R	212W		6/22	5 am		X	X	X	X	X		72		X	X		
John Q	10	M	Stu	5		6/23	9 pm	X	X	X			X		28	1				
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C				P	E	H	X
								N	V	D	3	F	C			*				

Use these codes: P preschooler
   Stu student
   R resident
   S staff

Use these job codes for staff job duties:
   P patient care
   F food service
   T teacher/teacher's assistant
   H housekeeping
   M maintenance
   A administrative/clerical
   O other

*not applicable to nursing home residents

Instructions
Mark "yes" answers with a check mark; use a question mark if you're not sure. Refer to the examples. Use additional sheets as necessary. Fax them to your local health department or as instructed.

For help using this log, contact the CD Nurse at your county health department; or Lore Elizabeth Lee, or the on-call epidemiologist at the Oregon Public Health Division in Portland (971-673-1111).

Revised: 10.02.07