



WASHTENAW COUNTY PUBLIC HEALTH  
...focused on prevention

WASHTENAW COUNTY SCHOOL AND CHILD CARE CENTER  
WEEKLY REPORT OF COMMUNICABLE DISEASE



Schools and child care centers play an essential role in surveillance of communicable disease among children. According to the State of Michigan Public Health Code (Public Act 368, of 1978 as amended), the local Health Department shall be notified of the occurrence of reportable communicable disease (**ESPECIALLY RASH-LIKE ILLNESSES WITH FEVER**).

Please FAX completed form each Friday to Washtenaw County Public Health at (734) 544-6706 (Secure fax line)

1 Week Ending:  School/ Child Care:  District:  Current Enrollment:   
 (Friday's date)

2 Call the Health Department **IMMEDIATELY** at (734) 544-6770 if any of the following illnesses are suspected or confirmed: **Measles, Mumps, Rubella** (German measles), **Pertussis** (Whooping cough), **Meningitis** (viral or bacterial), **Hepatitis A or B, Tuberculosis, and SARS**. Also report the unusual occurrence or outbreak of any disease or infection.

3 Report the number of students each week with suspected or confirmed cases of:  
 Chickenpox  (Complete the Chickenpox Report Form for each case)

Respiratory Illness  (Any student with fever or pneumonia **AND** any of the following symptoms: sore throat, cough, generalized aching in the muscles of the arms/legs/back)

Gastrointestinal Illness  (Any student with vomiting and/or diarrhea) (Norovirus-like)

5 Please Check Here If:  
 No diseases to report  
 School Closed (dates) \_\_\_\_\_  
 Other information: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4 TOTAL ABSENCES For any reason (This information is optional)

Monday	Tuesday	Wednesday	Thursday	Friday	TOTAL
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

6 Submitted by: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Date: \_\_\_\_\_