

**ENTERIC OUTBREAK LINE LISTING –
CHILD CARE CENTRES**

Fax Daily by Noon: 1-855-934-5463

- Child Line Listing
 Staff Line Listing

**PLEASE REPORT ANY HOSPITALIZATIONS OR DEATHS TO PUBLIC HEALTH IMMEDIATELY
519-822-2715 or 1-800-265-7293 ext. 4752**

Date Reported: _____

Total Number of Children Enrolled in Centre: _____

Outbreak # 2266 – 20 ____ - ____

Total Number of Staff at Centre: _____

Name of Facility: _____

Public Health Inspector: _____

A case is defined as any resident/staff with at least one of the following within a 24-hour period:

- Two (2) or more episodes of unexplained loose/watery bowel movements
- Two (2) or more episodes of vomiting
- One (1) episode of unexplained loose/watery bowel movements and one (1) episode of vomiting

Case Identification					Symptoms							Lab Tests/Results		Outcome		
Case Number	Initials	Gender: M F	Room #	Onset Date (mm/dd)	Diarrhea	Bloody Diarrhea	Abdominal pain/Cramps	Vomiting	Nausea	Abnormal Temperature (°C)	Other (Please Specify)	Stool Sample Collected (mm/dd)	Organism Identified	Resolved (mm/dd)	Returned to Centre (mm/dd)	Relapse (mm/dd)

For additional information please refer to *Control of Gastroenteritis Outbreaks in Long-Term Care Homes* (Ministry of Health and Long-Term Care, October 2013)

The information on this form is collected under the authority of the *Health Protection and Promotion Act* in accordance with the *Municipal Freedom of Information and Protection of Privacy Act* and the *Personal Health Information Protection Act*. This information will be used for the delivery of public health programs and services; the administration of the agency; and the maintenance of health-care databases, registries and related research, in compliance with legal and regulatory requirements. Any questions about the collection of this information should be addressed to the Chief Privacy Officer at 1-800-265-7293 ext. 2975.