|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| New Jersey Department of HealthCommunicable Disease Service | | | | | | | | | | | | | | | STUDENT SYMPTOMS LINE LISTING | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | **E -** | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | |
| School Name | | | | | | | | Reported By | | | | | | | | | | | | | Telephone | | | | | | Report Date | | | | | |
| Total Number of Students in School | | | | | | Number of Students Ill Today | | | | | | | | | | Total Number of Staff | | | | | | | | | Number of Staff Ill Today | | | | | | | |
|  | **Initials** | **Age** | **Gender** | **Grade** | **Room** | **Diarrhea** | **Bloody Stool** | | **Abdominal Pain** | **Nausea** | **Vomiting** | **Temp** | **Headache** | | **Sore Throat** | | **Cough** | **Fatigue** | **Chills** | **Rash** | | **Other, Specify** | | **Other, Specify** | **Onset Date** | | **Duration of Symptoms** | **Seen by MD** | **Hospitalized** | **Specimen**  **Collected** | **Diagnosis or**  **Test Results** | |
| ***Example:* JD** | | **7** | **female** | **1** | **223** | **yes** | **unk** | | **yes** | **yes** | **no** | **102.5** | **unk** | | **unk** | | **unk** | **unk** | **unk** | **unk** | | **dizziness** | |  | **9/1/12** | | **4 days** | **yes** | **yes** | **yes** |  | |
| **1** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **2** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **3** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **4** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **5** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **6** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **7** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **8** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **9** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |
| **10** |  |  |  |  |  |  |  | |  |  |  |  |  | |  | |  |  |  |  | |  | |  |  | |  |  |  |  |  | |

CDS-33

FEB 13