

## COVID-19 Illness Reporting Line List

<b>Name of child care centre:</b>	<b>Contact person:</b>	<b>Date:</b>
	<b>Best reached at:</b>	<b>Note:</b> This line list is to be used for illness reporting only and is not intended to replace the previous respiratory/gastro line list. The previous list is to be used to report an increased in illnesses in your centre.
<b># of children in the centre:</b>	<b># of staff in the centre:</b>	

Name	Staff or Child	Symptom Onset Date	Symptoms (include whether new, worsening or different from baseline)													Known COVID-19 Exposure (Y/N)	Tested (Y/N/Refused)	Test Result N – negative; P – positive	Expected Date of Return	
			Fever (37.8C or 100.0F or greater)	Cough	Shortness of Breath	Sore Throat	Runny Nose	Nasal Congestion	Nausea	Vomiting	Diarrhea	Abdominal Pain	Chills	Pink eye (Conjunctivitis)	Other: (Refer to symptoms list)					

**Note:** Additional symptoms of COVID-19 can be found on the Ministry of Health’s [website](#) and are updated regularly.

Please email the line list to [Outbreak.Intake@bchu.org](mailto:Outbreak.Intake@bchu.org).

**Clear Form**