# School Absenteeism Reporting Form and

# Diseases of Public Health Significance Reportable to Public Health

Report Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal/Secretary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School Absenteeism Reporting Form**

When school absenteeism rates due to illness are above your usual baseline for students and/or staff (i.e., >10% than normal and rising over 3 or more consecutive days), schools will use this form to report to public health. **Please fax this form to the appropriate local public health unit (see below).**

|  |  |
| --- | --- |
| **Total school population of students (#):**  |  **Number of students absent today *due to illness*:** \_\_\_\_\_ |

**Total school population of staff (#):** \_\_\_\_\_\_  **Number of staff absent today *due to illness*:** \_\_\_\_

# Diseases of Public Health Significance Reportable to Public Health

The local Medical Officer of Health must be informed of Diseases of Public Health Significance, reportable to public health per the *Health Protection and Promotion Act*.

* **Confirmed or suspect cases** of Diseases of Public Health Significance among students and staff, such as **chickenpox**, must be reported to the appropriate local public health unit immediately by **faxing this form.**
* The appropriate public health unit will follow-up on all cases of Diseases of Public Health Significance reported.
* If any further action is required by the school, the Principal will be notified.
* Please refer to the reverse side of this form for a complete list of Diseases of Public Health Significance.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Date of Birth** | **Parent/Guardian** | **Phone Number** | **Disease(s) of Public Health Significance****(confirmed or suspect cases)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Please contact the appropriate local public health unit for questions:



**Municipality of Chatham-Kent** Public Health Unit – Clinic Services

177 King St. E., Suite 2

Chatham ON N7M 3N1

Tel: 519.355.1071 Fax: 519.355.0848

[www.ckpublichealth.com](http://www.ckpublichealth.com/)

**Lambton Public Health**

160 Exmouth Street

Point Edward ON N7T 7Z6

Tel: 519.383.8331 Fax: 519.383.7092

Email: resf.lambton@county-lambton.on.ca

[www.lambtonpublichealth.ca](http://www.lambtonpublichealth.ca/)

**Diseases of Public Health Significance Reportable to Public Health**

|  |  |
| --- | --- |
| Acquired Immunodeficiency Syndrome (AIDS) | **\*Legionellosis** |
| Acute Flaccid Paralysis | Leprosy |
| Amebiasis | Listeriosis |
| **\*Anthrax** | Lyme Disease |
| Blastomycosis |  |
| **\*Botulism** | **\*Measles** |
| **\*Brucellosis** | **\*Meningitis, acute** |
| Campylobacter enteritis | **\*Bacterial** |
| Carbapenamase –producing Enterobacteriaceae, colonization or infection |  |
| Chancroid | 1. Viral |
| Chickenpox (Varicella) | 2. Other |
| Chlamydia trachomatis infections | 3. **Meningococcal disease, invasive** |
| **\*Cholera** | Mumps |
| **\*Clostridium difficile infection (CDI) outbreaks in public****hospitals** | Ophthalmia neonatorium |
| **\*Coronavirus, novel including SARS, MERS and COVID-19** |  |
| Creutzfeldt – Jakob disease, all types | Paralytic Shellfish Poisoning |
| **\*Cryptosporidiosis** | **\*Paratyphoid Fever** |
| **\*Cyclosporiasis** | Pertussis (Whooping Cough) |
| **\*Diphtheria** | **\*Plague** |
| **E. coli (see Verotoxin producing E.coli)** |  |
| **Echinoccoccus multilocularis infection** |  |
| **\*Encephalitis, including:** | Pneumococcal disease, invasive |
| 1. **\*Primary, viral** | **\*Poliomyelitis, acute** |
| 2. Post-infectious | Psittacosis/Ornithosis |
| 3. Vaccine-related | **\*Q Fever** |
| 4. Sub-acute sclerosing panencephalitis | **\*Rabies** |
| 5. Unspecified | **\*Respiratory infection outbreaks in institutions and public hospital** |
| **\*Food poisoning, all causes** | **\*Rubella** |
| **\*Gastroenteritis outbreaks in institutions and public hospitals** | Rubella, congenital syndrome |
| **\*Giardiasis, except asymptomatic cases** | Salmonellosis |
| Gonorrhea |  |
| **\*Group A Streptococcal disease, invasive** | **\*Shigellosis** |
| Group B Streptococcal disease, neonatal | **\*Smallpox** |
| **\*Haemophilus influenza disease, all types invasive** | Syphilis |
| **\*Hantavirus Pulmonary Syndrome** | Tetanus |
| **\*Hemorrhagic fevers, including:** | Trichinosis |
| **1. \*Ebola virus disease** | Tuberculosis |
| **2. \*Marburg virus disease** | **\*Tularemia** |
| **3. \*Other viral causes** | **\*Typhoid Fever** |
| **\*Hepatitis, viral** | **\*Verotoxin-producing E. coli infection, including Haemolytic Uremic Syndrome (HUS)** |
| **1. Hepatitis A** | **\*West Nile Virus Illness, including:** |
| 2. Hepatitis B | **1. \*West Nile Fever** |
| 3. Hepatitis C | **2. \*West Nile Virus neurological manifestations** |
| Influenza | Yersiniosis |
| **\*Lassa Fever** |  |

Diseases with an asterisk (\*) require immediate Public Health follow-up, per the *HPPA*, O. Reg. 135/18, O/ Reg. 569