

School Communicable Disease Reporting Handbook

How to Report Student Illnesses

Ottawa County Health Department

12251 James Street

Holland, MI 49424



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What is a Communicable Disease?

A communicable disease is an infectious illness which can result from either direct contact with an infected individual, an infected individual's discharges (such as mucous, saliva, feces, or body fluids), or by indirect contact (for example, through a mosquito bite).

Why do Schools & Daycares Need to Report Communicable Diseases?

Michigan law requires that schools and childcare centers report the occurrence of any communicable disease to the local health department on a weekly basis. Physicians, laboratories, and other entities are also required to report the occurrence of any communicable disease to the local health department on a daily basis. (**Act No. 368 of the Public Acts of 1978-Communicable Disease Reporting**)

Communicable disease reports from all of the reporting entities are reviewed by the staff at the Ottawa County Health Department to identify trends of illnesses. It is important for schools to report on a weekly basis for a number of reasons, including:

- To identify outbreaks and epidemics
- To enable preventive treatment and/or education
- To ensure the safety of the educational environment in your school
- To focus prevention programs, identify special care needs, and allocate resources efficiently
- To facilitate research
- To assist with local, state, national, and international disease surveillance efforts

Collecting Timely and Accurate Information

Timely, accurate disease reporting is essential to the health of all residents of Ottawa County. It is extremely important that all schools in Ottawa County comply with reporting requirements. The following steps will help reporting to be timely and accurate:

- Designate one person at each school to collect accurate communicable disease data daily
- Train an alternate person to collect and report communicable disease data in case the primary person is absent
- Submit communicable disease reports online or by fax to the Ottawa County Health Department **every Friday by 11am, *even if there are no diseases to report***
- Notify the OCHD immediately when you become aware of an illness that is required to be phoned into the Health Department
- Have a **detailed** school answering machine message which requests **specific information** about a child's absence
- Use a consistent protocol to question parents about the child's illness

Obtaining Information from Parents

Answering Machine Message and Illness Inquiry

To assure receipt of accurate and consistent information from each school, request the following when questioning a parent/guardian about a child's illness (either in person or via an answering machine message).

1. The symptoms of the illness (vomiting, diarrhea, fever, rash, etc.)
2. The type of illness if known and who identified the illness
3. A telephone number where the parent/guardian can be reached or an address if there is no phone

Newsletter Information for Parents

The following is an example of what schools could include in their newsletters or other correspondence to parents to make them more aware of the importance of calling in children's illnesses and what information is needed:

Important Notice to Parents/Guardians

from the Ottawa County Health Department Regarding Student Absences

The Ottawa County Health Department is working directly with your child's school to make Ottawa County a healthier place to live. Michigan law requires that schools report the occurrence of any communicable disease to the local health department on a weekly basis. To assist your child's school in reporting communicable diseases to the health department and preventing disease outbreaks, please be specific when reporting your child's absence.

When calling in for a child please include the following information:

1. A description of the symptoms of the illness (vomiting, fever, rash, etc.)
2. The type of illness if known and who identified the illness
3. Your telephone number (if no phone, give address)

Your cooperation with the school and the Ottawa County Health Department is greatly appreciated.

Detailed Directions for Using On-line Reporting

Before you may submit your reports online, you must **complete a registration form** found in this booklet. The registration form is also available at www.miOttawa.org/schoolreporting/.

During the week, use the attached “Disease Reporting Tally Sheet” to keep track of incoming reports as they are phoned in to your building. At the end of the week, use this “Tally Sheet” to complete the report online. If a case of any of the listed “Serious/rare illnesses” is reported to your school, call the health department immediately at (616)396-5266 and speak to the communicable disease supervisor. If a supervisor or a communicable disease nurse is not available when you call, leave a message with the name of the school, name of the student, the type of illness you are reporting, and contact information for the student and their doctor.

Web Address: www.miOttawa.org/schoolreporting/

- **Login:** Using your assigned User ID and Password, enter the system. If you do not have a User ID and Password, choose “Register to use Online Reporting.” One will be assigned to you after following the instructions on the form.
- **Select Week Ending Date from the drop down menu-**This should always be a Friday even if schools ends on a different day that week
- The information about your school will automatically be populated. If this information is incorrect or has changed, please call 616-494-5597
- **Key Current School Enrollment-**Enter the total number of students enrolled in your school as of the current week
- **Key the total number of “Flu-Like Illness”** cases (according to the given definitions) that occurred in the previous week. **Key the total number of “Stomach Virus”** cases (according to the given definitions) that occurred in the previous week
 - ❖ Do not count the same child more than once
 - ❖ Enter “0” if no cases occurred in the previous week
- For **each** case of Chickenpox complete the “Chickenpox (Varicella) Reporting Form” (available on website) and fax to the health department (616-393-5659) within 7 days. **Key the total number of Chickenpox forms** faxed to the health department within the last week
- If there were no diseases to report, check the appropriate box.
- If schools was closed due to an illness, check the appropriate box and please call the health department at (616)396-5266
- **Click Submit**, print a page for your records and click **Logout**

<p>Submit the online report to Health Department by 11 am on Friday even if there are no diseases to report</p>
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Detailed Directions for Using the Fax Form for Reporting

Section 1: General Information

- **Week Ending**-This should always be a Friday even if school ends on a different day that week
- **School Name**-Fill in the name of your school, pre-school, or daycare
- **School ID Number**-Corresponds to the district and building code assigned by the state
- **Current School Enrollment**-Enter the total number of students enrolled in your school as of the current week

Section 2: Serious Communicable Diseases

- If a case of any of the listed “Serious/rare illnesses” is reported to your school, call the health department immediately at (616)396-5266 and speak to the communicable disease supervisor
- If a supervisor or a communicable disease nurse is not available when you call, leave a message with the name of the school, name of the student, the type of illness you are reporting, and contact information for the student and their doctor

Section 3: Flu-Like Illness and Stomach Virus

- Enter the total number of “Flu-Like Illness” and “Stomach Virus” cases (according to the given definitions) that occurred in the previous week
- Do not count the same child more than once
- Enter 0 if no cases occurred in the previous week

Section 4: Chickenpox (Varicella) Reporting

- For **each** case of Chickenpox that is reported please complete the “Chickenpox (Varicella) Reporting Form” (available on website) and fax to the health department within 7 days
- Indicate the total number of Chickenpox forms faxed to the health department within the last week

Section 5: Checklist

- Check any appropriate boxes
- If school was closed due to an illness, please call the health department at (616)396-5266

Section 6: Submission Information

- **Submitted by**-Enter name of individual completing form
- **Phone Number**-Contact number for individual submitting form
- **Email**-Email address of individual submitting form
- **Date**-Day that the form was submitted to the health department

**Fax completed form to Health Department by 11 am on Friday
even if there are no diseases to report**

List of Reportable Diseases

The following is a list of conditions required to be reported by schools, child-care centers, and camps. School personnel are not expected to be familiar with every disease listed below. However, this list should be available for quick reference whenever there is doubt as to whether a disease should be reported. You may always call the health department at (616) 396-5266 if you have ANY questions about these diseases.

Acquired Immune Deficiency Syndrome (AIDS)	Hepatitis C virus, (Anti-HCV)
Arbovirus (see Encephalitis, viral)	Hepatitis, non-ABC
Avian influenza	Histoplasma capsulatum
Bacillus anthracis (Anthrax)	HIV (Confirmed)
Blastomyces dermatitidis	Influenza virus (Weekly aggregate counts)
Borrelia burgdorferi (Lyme Disease)	Kawasaki Disease
Bordetella pertussis (Pertussis)	Leptospira species
Brucella species	Legionella species
Burkholderia pseudomallei & Mallei species	Listeria monocytogenes
Calymmatobacterium granulomatis	Meningitis, viral & bacterial
Campylobacter jejuni	Measles virus (Rubeola)
Chickenpox (Varicella)	Mumps virus
Chlamydia psittaci (Psittacosis)	Mycobacterium bovis,
Chlamydia trachomatis (Trachoma)	Mycobacterium leprae (Leprosy)
Chlamydia trachomatis (Genital infections)	Mycobacterium tuberculosis (Tuberculosis)
Clostridium botulinum (Botulism)	Neisseria meningitidis, sterile sites (Meningococcal Disease)
Clostridium tetani (Tetanus)	Orthopox viruses (Smallpox, Monkeypox)
Coccidioides immitis (Coccidioidomycosis)	Plasmodium species (Malaria)
Corynebacterium diphtheriae (Diphtheria)	Rabies virus
Coxiella burnetii (Q Fever)	Reye's Syndrome
Cryptococcus neoformans	Rheumatic fever
Cryptosporidium species	Rickettsia rickettsii (Rocky Mountain Spotted Fever)
Cyclospora species	Rickettsia species (Typhus Group)
Dengue virus	Rubella virus
Ehrlichia species	Salmonella species, including S. Typhi (Typhoid Fever)
Encephalitis, viral	Severe Acute Respiratory Syndrome (SARS)
California serogroup, Eastern & Western Equine, Powassan, St. Louis, West Nile, Unspecified	Shigella species
Entamoeba histolytica (Amebiasis)	Spongiform Encephalopathy (Includes CJD)
Escherichia coli, O157:H7 & other shiga toxin positive serotypes	Staphylococcus aureus, vancomycin intermediate/resistant (VISA/VRSA)
Francisella tularensis (Tularemia)	Staphylococcus aureus, (MRSA), outbreaks only
Giardia lamblia	Streptococcus pyogenes, group A, sterile sites
Guillain-Barre Syndrome	Streptococcus pneumoniae, sterile sites, susceptible/resistant
Haemophilus ducreyi (Chancroid)	Toxic Shock Syndrome
Hantavirus	Trichinella spiralis (Trichinosis)
Haemophilus influenzae, < 15 years of age, sterile site	Vibrio cholerae (Cholera)
Hemolytic Uremic Syndrome (HUS)	West Nile Virus
Hemorrhagic fever viruses	Yellow fever virus
Hepatitis, viral	Yersinia enterocolitica
Hepatitis A virus, (Anti-HAV IgM)	Yersinia pestis (Plague)
Hepatitis B virus, (HBsAg), within 24 hrs on pregnant women	Always report any unusual occurrence or outbreak.

Diseases That DO NOT Need to Be Reported

Conjunctivitis (Pink eye)	Head lice
Roseola	Fifth's Disease
Mononucleosis (Mono)	Hand, foot, and mouth disease
Strep throat	Impetigo
Scarlet Fever	Ringworm
Scabies	

Contact Numbers

Ottawa County Health Department-----(616)396-5266

- To immediately report a serious illness
- For information on disease management in schools
- For reporting guidelines
- For questions about disease surveillance and disease rates
- For questions about school reporting rates

Fax Number----- (616)393-5659

Forms

The following pages include copies of each form you may need. All forms are available online at miOttawa.org/health. Click on Epidemiology and follow the links to Disease Reporting.

- Tally Sheet: Print copies to use when taking incoming calls of illness. This form is not appropriate for your official weekly report.
- On-line Disease Reporting Registration Form: Use this form to register your organization to perform your weekly reports online.
- Chicken Pox Form: Use this form to supplement any cases of chicken pox in your weekly report.
- Reporting Form: Use this form to make your weekly disease reports via fax. Please note that the online system is strongly encouraged.



Ottawa County Health Department

On-line Disease Reporting Registration & Update Form

To submit your "Michigan School Building Weekly Report of Communicable Disease" to the Health Department online, you must complete this form and return by mail, fax, or e-mail.

- **Mail:** Ottawa County Health Department
Communicable Disease Unit
12251 James Street
Holland, MI 49424
- **Fax:** (616) 393-5659
- **Email:** arooks@miottawa.org

IMPORTANT NOTE: If you submit reports from more than one school each week, you will need a different username and password for each school.

Questions? Call (616) 396-5266

Name: _____ Title: _____
School: _____ ID#: _____
Address: _____ City: _____ Zip: _____
Phone: _____ Fax: _____
E-mail: _____

Are you replacing someone who should now be deleted from our system?

Yes No

If Yes, Please name the person you are replacing: _____

You will choose your case sensitive username and password.

Please indicate your preferences below:

Username: _____ Password: _____

OCHD OFFICE USE ONLY

Date Received: _____

Date Registered: _____ Initials: _____

Date Notified User: _____

Notes: _____



Ottawa County Health Department Disease Reporting Tally Sheet

Week Ending Friday, _____
(Date)

Contact the Ottawa County Health Department
immediately at 616-396-5266 to report:

Measles, Rubella, Encephalitis, Haemophilus Influenza Type B,
Tuberculosis, Mumps, Meningitis, Hepatitis,
Pertussis (Whooping Cough),
or any other unusual occurrence or outbreak.

Flu-Like Illness:

(Fever, tiredness, headache, dry cough, runny nose, muscle pain, chills, sore throat)

_____	_____	_____	_____	_____
Monday	Tuesday	Wednesday	Thursday	Friday

Stomach Virus: (nausea, vomiting, diarrhea)

_____	_____	_____	_____	_____
Monday	Tuesday	Wednesday	Thursday	Friday

Chickenpox:

_____	_____	_____	_____	_____
Monday	Tuesday	Wednesday	Thursday	Friday

Use this sheet to report weekly totals online at
www.miOttawa.org/schoolreporting/



Ottawa County Health Department Disease Reporting Tally Sheet

Week Ending Friday, _____
(Date)

Contact the Ottawa County Health Department
immediately at 616-396-5266 to report:

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Tuberculosis, Mumps, Meningitis, Hepatitis,
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or any other unusual occurrence or outbreak.

Flu-Like Illness:

(Fever, tiredness, headache, dry cough, runny nose, muscle pain, chills, sore throat)

_____	_____	_____	_____	_____
Monday	Tuesday	Wednesday	Thursday	Friday

Stomach Virus: (nausea, vomiting, diarrhea)

_____	_____	_____	_____	_____
Monday	Tuesday	Wednesday	Thursday	Friday

Chickenpox:

_____	_____	_____	_____	_____
Monday	Tuesday	Wednesday	Thursday	Friday

Use this sheet to report weekly totals online at
www.miOttawa.org/schoolreporting/

OTTAWA COUNTY HEALTH DEPARTMENT

Chickenpox (Varicella) Reporting Form

Please Fax Completed Form within 7 Days of Illness to Health Department at (616)393-5659

Date Illness Reported: ____/____/____

Diagnosed By: Doctor Parent Other: _____

Patient Name: _____

Parent or Guardian (required if under 18): _____

Address: _____ City: _____ Zip: _____

Phone: _____ Alternate Phone: _____

Sex: Male Female Age: _____ Date of Birth: _____

Race:

- Caucasian Hawaiian/Pacific Islander
 African American American Indian/Alaska Native
 Asian Other: _____
 Unknown

Ethnicity:

- Hispanic/Latino
 Not Hispanic/Latino
 Unknown

Varicella vaccination history

Has patient received varicella vaccine? Yes No Waiver Unknown

If yes: Dose #1: ____/____/____ (date)

Dose #2: ____/____/____ (date)

Severity of illness (as reflected by approximate number of lesions):

- Fewer than 50 (easily counted in 30 seconds)
 50-249 (patients hand can be placed on body without touching a lesion)
 250-499 (patients hand cannot be placed on body without touching one or more lesions)
 500 or more (cannot observe normal skin)

Name of person submitting this report: _____

Name of facility, office, or school: _____

Phone: _____ Fax: _____

Individual chickenpox (varicella) cases are required by law to be reported by physicians and schools in Michigan, effective Sept. 1, 2005

This reporting is expressly allowed under HIPAA Communicable Disease Rules: R325, 171, 172, 173



OTTAWA COUNTY HEALTH DEPARTMENT

Michigan School Building Weekly Report of Communicable Diseases to Local Health Department

1 Week ending: ___/___/___ (Always a Friday) School Name: _____ School Pre-School Daycare

School ID Number: 70 — ___ — _____ Current School Enrollment: _____

Instructions

A: Fill out form as completely as possible (Sections 1, 2, 3, 4, 5, 6)

B: Fax by **Friday at 11am to 616-393-5659** EVEN IF THERE ARE NO DISEASES TO REPORT

C: Fill out and fax "Chickenpox Reporting Form" for each case of suspected or confirmed chickenpox

2 Serious/rare illness:

Measles	Rubella	Encephalitis	Haemophilus Influenza Type B	Tuberculosis
Mumps	Meningitis	Hepatitis	Pertussis (Whooping Cough)	Unusual occurrence/outbreak

Immediately call Health Department at (616)393-5735

3 Record **total number** of students each week with suspected or confirmed cases of:

	TOTAL CASES	DEFINITION
FLU-LIKE ILLNESS		a) Fever plus any of the following symptoms: b) Sore throat, cough, aching in the back or limb muscles
STOMACH VIRUS		Diarrhea and/or vomiting for 24 to 48 hours

5 PLEASE CHECK IF:

NO DISEASES TO REPORT THIS WEEK

SCHOOL CLOSED DUE TO ILLNESSES

4 **CHICKENPOX:** Complete and fax "Chickenpox Reporting Form" for **each** case

of "Chickenpox Reporting Forms" faxed:

6 Submitted by: _____

Phone Number: _____

Email: _____

Date: _____

According to Public Act 368, of 1978 as amended, the local health department shall be notified immediately of the occurrence of communicable disease (especially rash-like illness with fever).

