

<p>Mailing Address: Department of Health and Wellness Public Health Surveillance PO Box 488 Halifax, NS B3J 2R8</p> <p>Note: Please ensure envelope is labeled 'MEDICAL CONFIDENTIAL'</p>	<p>Confidential Fax#: 902-424-0550</p> <p>E-mail: surveillancedhw@novascotia.ca Via Secure File Transfer (only)</p>
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General Reporting

Daycare Surveillance Reporting Tool	Completed case forms should be filed according to NSHA procedures. For further information contact surveillancedhw@novascotia.ca
School Surveillance Reporting Tool	Completed case forms should be filed according to NSHA procedures. For further information contact surveillancedhw@novascotia.ca
School and Daycare Absenteeism Flow Chart	For reference
ER ICP ILI surveillance weekly report form	Completed case forms must be sent to the DHW Surveillance Team via secure e-mail, mail or confidential fax or e-mail SURVEILLANCEDHW@novascotia.ca. For further information contact surveillancedhw@novascotia.ca
LTCF Residents: Respiratory Surveillance Line Listing	Completed line listings should be filed according to NSHA procedures. For further information contact surveillancedhw@novascotia.ca

Adverse Events Following Immunization (AEFI)

Adverse Events Following Immunization (AEFI) PHAC Form	Completed case forms should be filed according to NSHA procedures. For further information contact surveillancedhw@novascotia.ca
Adverse Events Following Immunization (AEFI) User's Guide	Guidelines for completion of Adverse Events Following Immunization (AEFI) Case Report Form

Seasonal Influenza Vaccine Data Collection

Clinic Line List	For clinic use
Health Care Facilities Immunizing Staff/Volunteers (excluding LTC/RCF)	For facility use. For further information contact your local public health office
All Other Facilities or Clinics (non-Public Health and non-Health Care Facilities)	For facility or clinic use. For further information contact your local public health office
Seasonal Influenza Immunization Summary Sheet	For NSHA public health services use. For further information contact surveillancedhw@novascotia.ca

Disease Specific Surveillance Forms

Acute Hepatitis (non-hepatitis A-E)

Acute Hepatitis (non-hepatitis A-E) Case Report form (PHAC)	Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact surveillancedhw@novascotia.ca
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Ebola

Ebola Case Report Form (PHAC)	Completed forms should be uploaded in Panorama. Notify DHW surveillance team immediately after the initial report is completed. For further information contact surveillancedhw@novascotia.ca NOTE: Please complete as much detail as possible on this form at the time of the initial report. It is not expected that all fields will be completed during the initial report, but that updates will be made when information becomes available.
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Emerging Respiratory Pathogens and Severe Acute Respiratory Infection

Emerging Respiratory Pathogens and Severe Acute Respiratory Infection (SARI) Case Report Form (PHAC)	Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact surveillancedhw@novascotia.ca
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Enteric, Foodborne and Waterborne

Cyclosporiasis Hypothesis Generating Questionnaire (PHAC)	Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact surveillancedhw@novascotia.ca
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Invasive Listeria Questionnaire (PHAC)	<p>Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact surveillancedhw@novascotia.ca</p>
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Mpox

Mpox Case Report Form (PHAC)	<p>Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact surveillancedhw@novascotia.ca</p>
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Tuberculosis (TB)

Canadian Tuberculosis and Air Travel Form (PHAC)	<p>Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact surveillancedhw@novascotia.ca</p>
Canadian Tuberculosis and Air Travel Guidelines (PHAC)	<p>Guidelines for completion of Canadian Tuberculosis and Air Travel Form</p>