

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

<a href="#">Daycare Surveillance Reporting Tool</a>	Completed case forms should be filed according to NSHA procedures. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>
<a href="#">School Surveillance Reporting Tool</a>	Completed case forms should be filed according to NSHA procedures. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>
<a href="#">School and Daycare Absenteeism Flow Chart</a>	For reference
<a href="#">ER ICP ILI surveillance weekly report form</a>	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 <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>
<a href="#">LTCF Residents: Respiratory Surveillance Line Listing</a>	Completed line listings should be filed according to NSHA procedures. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>

## Adverse Events Following Immunization (AEFI)

<a href="#">Adverse Events Following Immunization (AEFI) PHAC Form</a>	Completed case forms should be filed according to NSHA procedures. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>
<a href="#">Adverse Events Following Immunization (AEFI) User's Guide</a>	Guidelines for completion of Adverse Events Following Immunization (AEFI) Case Report Form

## Seasonal Influenza Vaccine Data Collection

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

## Disease Specific Surveillance Forms

### Acute Hepatitis (non-hepatitis A-E)

<a href="#">Acute Hepatitis (non-hepatitis A-E) Case Report form (PHAC)</a>	Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>
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### Ebola

<a href="#">Ebola Case Report Form (PHAC)</a>	Completed forms should be uploaded in Panorama. Notify DHW surveillance team immediately after the initial report is completed. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a> <b>NOTE:</b> 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

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

<a href="#">Cyclosporiasis Hypothesis Generating Questionnaire (PHAC)</a>	Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>
<a href="#">Invasive Listeria Questionnaire (PHAC)</a>	Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>

<a href="#">Salmonella - Frozen Processed Chicken Products Form (PHAC)</a>	Completed forms should be uploaded in Panorama. Notify DHW surveillance team when form is uploaded. For further information contact <a href="mailto:surveillancedhw@novascotia.ca">surveillancedhw@novascotia.ca</a>
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## Mpox

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

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